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THE UNIVERSITY OF ALBERTA
CLIENT/COUNSELOR SIMILARITY, MUTUAL DOGMATISM,
AND CLIENT PERCEPTIONS OF PRISON COUNSELING

by

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(C)

A THESIS
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DEDICATION

This dissertation is dedicated to my wife, Marion, for only through her sacrifices, support, encouragement, typing skill, and attention to detail could it ever have been completed.

Abstract

A two-part investigation of the perceptions of counseling as it exists in a maximum security Canadian prison setting was undertaken. It was argued that, although prisons are authoritative in nature, authority and therapy can, in fact, coexist in the counseling relationship. Authority was presented as a positive force in the inducement of a state of cognitive dissonance, the reduction of which results in positive therapeutic change. Client and counselor personality, as represented by dogmatism and client-counselor personality similarity, are identified in the theoretical framework as variables greatly influencing the counseling relationship.

Results of the major study, which used client (N = 97) ratings as a manifestation of their perceptions of the relationship each had with his respective counselor (N = 11), showed counselor dogmatism not to be significantly related to client perceptions as hypothesized. While the importance of counselor dogmatism was reduced, it was found that client dogmatism was significantly related to the dependent variable, client satisfaction. No support was found for the hypothesized relationship of client/counselor similarity to client perceptions. Finally, the relationship of client/counselor similarity to client perceptions was found not to be related in linear, quadratic, or cubic fashion, thus necessitating the rejection of the third hypothesis.

The second study served as a behavioral test to determine whether counselors were able to create conditions conducive to counseling. Perceptions by counselors and clients from three prisons, representative of maximum, medium, and minimum security institutions, and a community medical clinic, of video-taped counseling sequences in which positive and negative examples of each of three microcounseling skills were portrayed, were obtained. Ratings of counseling climate provided the measure of the subjects' perceptions. Results of the data analysis showed counselor perceptions not to differ significantly from client perceptions, thereby necessitating the rejection of the first hypothesis. The second hypothesis was accepted since no significant differences in perceptions across institutional settings were found. Counseling climate was perceived to be significantly higher for the segments of positive valence than for negative valence segments, thus confirming the third hypothesis. The fourth hypothesis was accepted since no differences in perceptions were found to exist across portrayals of the three microcounseling skills.

It was concluded that not only is the theoretical framework incorporating dissonance into the counseling relationship still viable, in spite of the failure to support the related hypotheses, but authority and counseling can coexist in the relationship. In addition, the role counselor dogmatism plays in counseling is indicated as being of less consequence than the literature would have

us believe, particularly where the client is concerned. In addition, the ability of prison counselors to discriminate good counseling technique from bad is indicated as increasing the probability that counseling may take place in a prison setting.

A model in which cognitive dissonance can be used to explain the counseling relationship in a prison setting is presented.

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The opportunity afforded me, an employee, by the Canadian Penitentiary Service, to engage in studies which now culminate in this dissertation is greatly appreciated, for without it the research would never have been undertaken.

This study was undertaken with considerable assistance from the group who is an integral part of any study--the research subjects. Without the cooperation of these people--counselors and clients--the majority of whom were prison inmates, the study could never have been brought to fruition.

Words are a poor means by which to express thanks to the persons who have aided in bringing this work to its conclusion. Thus, no attempt to this end will be made. Those persons--George Woods, George Fitzsimmons, former teachers, and special friends--know how much they have contributed and it is my sincerest hope that through my actions and interactions with them I have been able to communicate my gratitude.

A special acknowledgment for assistance rendered is directed to Wayne for, in being "loyal to his class," he has helped shape the future of corrections.

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CHAPTER I

Introduction

Prisons are unusual places. They exist as an anomaly, for the reason of their being is to perform four seemingly irreconcilable tasks: to protect society, to punish the offender, to act as a deterrent to others, and to rehabilitate the offender. In order to more adequately perform these tasks, prisons and prison systems have evolved over the centuries. The most important aspect of this evolutionary process is not in terms of the development of specially hardened steel for use in bars or the development of reinforced concrete cages designed to confine men, but how rehabilitation and its companion, treatment, can be carried out, perhaps in spite of the prison environment.

One must consider as an integral part of what is known as the correctional process, the interpersonal dynamics that exist between correctional counselors and their clients. These dynamics are the fundamental principles of social work, counseling, and therapy. Due to the opposing goals of punishment and rehabilitation, special problems exist in prisons which are not given much thought by therapists engaged in counseling activities outside of prisons. One of these problems pertains to the degree to which the nature of the authoritarian environment and counseling are compatible.

We know, from our study of people's vocational choices, that

certain types of people select particular occupations that meet their needs for achievement, suit their interests, and enable self-actualization to take place. This raises the second issue to be addressed here: namely, to what degree does a counselor's personality influence the counseling function that is performed. One of the personality variables closely related to counseling success is rigidity or dogmatism, characteristics which can also be used to describe institutions.

Correctional counselors' clients are believed to be somewhat less than open in their interactions with authority figures, but there is some evidence to support the contention that if an appropriate match of worker and client is made greater benefits will accrue in terms of outcome, client satisfaction, and counselor satisfaction. If an optimal match can be arranged that increases client satisfaction, the client will experience a conflict between what is felt and what he is told he should feel. Resolution of this difficult psychological incongruence or dissonant position is the crux of successful correctional counseling.

The reduction of dissonance is the result of successful counseling. However, how to assess success, perhaps even the degree of success, is the next thorny problem to be treated. Several methods of assessing outcome are described but, because of the nature of the relationship and the divergent experiences of the par-

ties involved, it is perhaps the client's perception of the therapeutic process which has the greatest value in determining success of therapy. However, because of the nature of self-report systems, there are many difficulties to be encountered in determining what the clients' perceptions are, particularly in view of the prison environment and pressures to conform to a polar or dissonant position.

The main study was designed to investigate the relationship that exists between inmates and their correctional counselor. It was hoped that by assessing the clients' perception of that relationship using self-report inventories designed to measure variables associated with therapeutic outcome, a framework, in which an optimal client-counselor matching schema existed, could be identified using the personality variable of dogmatism. A subsequent investigation, using both counselor and client perceptions of common counseling segments, was conducted to validate the findings of the first study.

CHAPTER II

LITERATURE REVIEW

Evolution of Prison Counseling

The history of imprisonment has been many faceted, spanning many centuries. People have been incarcerated, tortured, and put to death because of their religious beliefs, to punish theft, for failure to pay debts, and to prevent the reoccurrence of a particular crime. The early prison systems saw inmates congregated together in large rooms with no attempt to separate young from old, violent from nonviolent, or even psychotic from nonpsychotic. The first major change came at the hands of the Pennsylvania Quakers (Glaser, 1968) who, inspired by the individual cells of monasteries, advocated that offenders be similarly housed in individual cells. It was their hope that, by cutting off contaminating intercommunication, the contemplation of one's sins, penitence, and eventual repentance would result. This Pennsylvania System, as it came to be called, was expensive and brought insanity and suicide to the prison scene.

The means to combat the severe isolationism experienced in the Pennsylvania System was provided by the Auburn System of imprisonment which was characterized by the introduction of daily congregated work which was performed in rigid silence. The daily work was followed by nightly solitary confinement. It was in this

system, also known as the Silent System, that the characteristic prison uniform and the curious prisoners' gait, which resulted from walking lock-step in queues, were developed. These artifacts had largely disappeared by the end of World War II (Glaser, 1968).

Toward the latter part of the nineteenth century, the Auburn System faced its first real challenge by a system which embodied elements of the token economy. Prisoners were able to earn marks for good behavior and redeem them for additional privileges, reduction in restrictions, or for earlier release. Strongly associated with this system was an emphasis on education and vocational training.

The introduction of programs designed to reform and the acceptance of conditional release designed to test the effectiveness of the reformation programs marked the adoption of biological and social science approaches in prison work. With these innovations and associated research came an emphasis on biological and emotional causes of crime, an approach soon modified by the revelations regarding criminal subcultures which showed crime to stem from a multiplicity of causes.

The behavioral science movement in prisons became the most important influence effecting the evolution of today's prison system, for it justified the major prison management scheme of placing emphasis on individual treatment of inmates. The result of

the growth of individualization in the second quarter of the twentieth century was classification and treatment of offenders.

Classification of Offenders

Classification of offenders has been a process used in prisons for many years, but primarily it referred to a method designed to facilitate discipline and administrative control. With the introduction of programs for education and vocational training came the requirement for a different system of classification whereby the needs and reformability of offenders were identified. Classification, thus, became the term used to describe the process of assessment, program formulation, and implementation (Sutherland & Cressey, 1960). This term is still much in vogue in prisons today.

During the assessment portion of classification, strengths, weaknesses, danger to self and others, escape potential, and potential to benefit from special treatment programs are identified for each offender shortly after admission. The case material is prepared for the Classification Committee, which is charged with the responsibility of drafting a program of treatment and training based on the individual's identified needs, and seeing that its recommended program is undertaken. The Classification Committee must monitor the individual's progress and make revisions to the

program consistent with newly identified needs (Committee on Classification and Case Work of the American Prison Association, 1947; Sutherland & Cressey, 1960). This latter phase has been termed reclassification.

The process of classification has been recognized as one of the more significant innovations in correctional treatment since the introduction of individualized programs (Elliott, 1963; Keldgord & Norris, 1972; Sutherland & Cressey, 1960). Regretably, the classification process has failed to operate as it was intended. The unavailability of diagnostic personnel results in the emasculation of the Classification Committee, thereby turning it into an assignment or work placement board (Sutherland & Cressey, 1960). Even where these personnel exist, the classification efforts are often not transmitted and used in actual program operations (Keldgord & Norris, 1972). What has resulted is an attempt to salvage what remains of the process by eliminating such phases as reclassification (Kruger, 1968) and playing down the role of the process such that it becomes simply a social casework approach to work placement, education, health, and parole preparation (Elliott, 1963).

It was stated earlier that the introduction of social science methods and research into the prison system was a powerful influence in changing the prison system. It is now stated that the

sterile and unpleasant connotation clinicians attribute to classification because of their fear of labeling people has brought about a change in the status of the classification process (Brancale, 1955). Moreover, "contacts and professional evaluations leading to classification actions too often are superficial and mechanical, with little dynamic interdisciplinary exchange even in our classification committees" (Dudley, 1966, p. 51). He also indicates that this results in the inmate meeting the committee with his defenses in full sail, further eroding the influence of the process of classification.

The impact the introduction of social science methods and attitudes has on the prison system generally and now more specifically the classification process is further illustrated in these words: "When classification is not used, clinical thinking becomes loose and irresponsible, disciplines remain unstructured, and there is lacking a framework within which scientific data may be developed" (Brancale, 1955, pp. 123-124). This defensive position illustrates that the climate is again ready for a change in correctional philosophy.

By freeing the correctional counselor from his subservience to the classification process, greater use of the skills unique to counseling can be achieved. These skills, when directed towards the reduction of the uncertainty, anxiety, and trauma associated

with the loss of freedom, can only be effective in reducing the incongruence experienced by the offender in prison. The reduction of incongruence shifts the focus of the rehabilitative effort towards social adjustment, education, and preparing the offender for life as a normal citizen (Friedlander, 1968; Glaser, 1968). The application of counseling techniques in a prison setting such that this goal can be realized will necessitate an upsetting of several myths and perhaps a restructuring of the prison system.

Related Aspects of Counseling Theory

Fundamentals

Encounters that are established between the inmate and the classification officer to whom he is assigned are, in the final analysis, relationships designed to guide the offender through the morasse of prison life. This relationship, born in a climate of authority and felt helplessness, is in reality a counseling relationship, for it typifies the central theme of the helping process that exists between the client and the helper. The persons engaged in the helping process are known by labels which tend to reflect the work environment in which they function (e.g., the social worker, school psychologist, and minister) but what they do is counseling. Rogers (1957) reduces the distinction among helpers in different work settings by indicating that two persons are in psycho-

logical contact. One, described as the client, is in a state of incongruence, being vulnerable or anxious, and the other, described as the therapist, is congruent or integrated in the relationship. Since this is analogous to what happens between the inmate and his classification officer, the terms client and counselor, respectively, will be used to refer to the parties in prison counseling relationships.

The concepts which enable one to relate prison counseling to counseling in general constitute the first three of the necessary and sufficient conditions for therapeutic personality change--client incongruence, counselor congruence, and psychological contact --to which are added the concepts of the counselor's unconditional positive regard toward the client, his empathic understanding of the client's internal frame of reference, and that these conditions are communicated such that they are perceptible by the client (Rogers, 1957).

Rogers' (1957) necessary and sufficient conditions for therapeutic change have been studied at great length, resulting in fewer or more therapeutic conditions being identified. Barrett-Lennard (1962) split unconditional positive regard into level and unconditionality of regard, arriving at four counselor-communicated variables including empathic understanding and therapist congruence. Truax (1968) makes reference to what has become known as the Truax

triad (Schulman, 1974)--empathy, genuineness, and nonpossessive warmth. Therapist variables--empathy, genuineness, and respect--are considered important by Jones (1974). From the psychiatric school of thought comes reference to respect and awareness (Fromm-Reichmann, 1950). Truax and Carkhuff (1967) refer to genuineness, nonpossessive warmth, and accurate empathy as being possessed and demonstrated in the relationship by the effective therapist. Carkhuff (1969) considers the core facilitative conditions to be empathic understanding, respect, genuineness, concreteness, confrontation, self-disclosure, and immediacy. It becomes evident then, that the characteristics to be exhibited in the counseling relationship by the counselor relate in some way to empathic understanding, genuineness, and respect.

Once these therapist conditions are present in the relationship, counseling, which is considered to be a nonjudgmental, non-evaluative listening process in which the counselor may interpret law, religion, and social mores, can take place. His primary obligation is to help the client to weigh all the alternatives prior to rendering a decision (Litwack, 1974). In order to help the client to make the choice most appropriate to the situation, the counselor may utilize a variety of procedures and techniques which have been developed to assist counselors. These procedures and techniques are embodied in the theories of counseling such as psychoanalysis, the foundation of which was laid by Freud (Fine, 1973);

client-centered therapy, which is the perceptual-phenomenological approach championed by Rogers (1957); the trait-factor or rational approach manifested in Rational Emotive Therapy (Ellis, 1973); the eclectic-psychotherapeutic approach espoused by Thorne (1973); learning theory presented by theorists Bandura (1971), Rotter (1954), and Wolpe (1958); and finally the existential approach adhered to by Frankl (1962), from which counselors may draw in assessing and establishing their own philosophical position on points critical to man's welfare (Downing, 1975).

While the formulation of these theories came after years of observing people with whom the theorist came into contact in his work setting, none relates to the observations of people in prison. Moreover, the traditional therapies, such as psychoanalysis in particular, is deemed not to be effective in the uniques of work settings--the prison--where factors often beyond the control of either the client or the counselor impinge on the counseling relationship. Such factors relate to the nature of the client, often termed a sociopath and thereby beyond help, and the authority of relationships, exemplified by the demands the legally constituted power the institution brings to bear on both client and counselor.

Authority in Counseling

In his initial formulations regarding the necessary and suf-

ficient conditions for constructive personality change, Rogers (1942) became one of the first theorists in counseling to address the role authority plays in counseling and psychotherapy. He took the position that, in counseling, therapy and authority cannot co-exist in the same relationship. The strength of this mutually exclusive nature is enhanced by the apparent permissiveness embodied in the principles of acceptance, empathy, and unconditional positive regard. Conventional use of the term nondirective therapy as a synonym for client-centered therapy (Rogers, 1951, 1957) characterizes the impact directiveness, when considered as a component of authority, would have on therapeutic interventions established under Rogers' necessary and sufficient conditions. It would be doomed to failure.

Several authors since Rogers support the mutual exclusivity of authority and counseling. Among them is Ciale (1959) who says, "In disciplinary cases, which are frequent, [in prison] the therapist has to disassociate himself from authority" (p. 92). Robitscher (1968) is also a supporter, believing that coercion, as a manifestation of authority, works against the atmosphere of mutual respect, confidence, and permissivity in which emotions can be permitted to emerge. The position taken by Smith and Berlin (1974) is that the exercise of choice, an important element in counseling, is missing in an authoritative setting like prison, for to refuse

to participate in therapy is to be labeled uncooperative. Korn and McCorkle (1959) describe the role of the counselor in prison as noncustodial in nature. The strongest support for the separation of counseling and authority comes from Chiles (1961), who says: "A social worker (who may also be a parole or probation officer) deceives himself if he thinks he can continue a casework relationship after having made an arrest" and concludes "The roles of social worker and policeman are mutually exclusive" (p. 375). It is even suggested that if counselors were independent administratively, thereby avoiding the difficulty of coping with authority, they could continue as treatment specialists (Cressey, 1959).

Authority becomes a problem when considered in the light of the counseling relationship because the viewpoint expressed thus far is not universally accepted. There are those who believe that a little authority can exist in counseling but only in cases of mild delinquency (Hamilton, 1940), or where parental control is necessary (Pazeian, 1964). Others, like Tappan (1949), believe that authority can be both detrimental as well as beneficial. Perhaps the most rational argument is that of Teeters and Reinemann (1950) who believe that authority does not stand in the way of counseling but forms an essential part of it. The following justification for considering this as a rational approach is presented by Hardman (1960):

- (a) A society devoid of authority is unknown to anthropologists.
- (b) The possibility that an offender will make a true adjustment without reconciliation with authority is nil.
- (c) A major dimension of one's personal adjustment is the degree to which he has come to terms with the authority inherent in his culture.
- (d) It is a sick society which has a predominance of its authority or conventions not integrated into the lives of its members. (p. 251)

The coercive component of authority is seen by Mangrum (1971) as being a positive force in the counseling relationship, a contention supported by Hardman (1957) who sees authority as an integral part of every counseling relationship since it is born in the client's incongruence, which itself may result from such diverse causes as real family or societal pressure to conform or the anxiety resulting from felt demands of society for conformity (Rizzo, 1972). Although authority is not considered to impede the counseling process (Lee, 1966), it can only become a functional tool for use by counselors if used in a manner appropriate to the setting (Mangrum, 1971; Tracey, 1961), particularly if one expects to obtain positive results (Meeker, 1957).

Counseling initiated under what has been referred to as the

cloud of authority is not considered to be more difficult than that initiated with the traditional voluntary client (Whiskin, 1969), in fact for some it is considered to be "highly gratifying" (Rizzo, 1972, p. 154). In view of this, it seems difficult to conceive of counseling, where authority may be a factor, as a marginal activity (Cressey, 1959; Ohlin, Piven, & Pappenfort, 1956). One possible explanation may lie in the dearth of literature on the subject (Berman, Purves, & Cole, 1961; Gometz & Parker, 1968; Whiskin, 1969). This situation is encapsulated by Yeleja (1971) who indicates that the place of authority in private practice is not treated in the literature. The focus of philosophical argument about authority in counseling is precipitated by the efforts of those counselors who attempt to function in social agencies, prisons, and court and probation settings with little other than the teachings that authority and counseling are incompatible. The situation has not changed much since Rogers (1942) suggested that more thought and research needed to be done on the issue.

The philosophical argument that has raged over the years has resulted in some progress. Buchan (1972), Carter (1961), and Yelaja (1971) have postulated the existence of different types of authority--that associated with power, that associated with expertise, and that aspect of authority which is psychological in nature. Psychological authority is considered to be:

An interpersonal relation in which one person (or group) exercises influence over the social behavior of another person (or group) who does not fully accept the reasoning that relates values to actions, but in which both parties know that this influence is being exercised; its intent is known, and hence recognized for what it is. (Tufts, 1971, p. 97)

It is this psychological authority, a form of surrendering of autonomy to the counselor, that must be achieved if the client is to be helped. Herein lies the area of greatest difficulty (Carter, 1961; Studt, 1959), for the counselor requires mature emotional adjustment towards authority and a disciplined adherence to the responsibilities embodied in the functioning of the agency to which he is attached.

It is in this context that the personality of the counselor is of utmost importance, for the emotionally insecure counselor can easily be baited by a recalcitrant client into a situation where defensive behaviors manifest themselves. The result could be disastrous for both parties involved since it sets the scene for the counselor to exercise the authority of power.

Counselor Personality

Acceptance that empathic understanding, genuineness, and re-

spect are necessary therapist contributions to the client-counselor interaction (Carkhuff & Berenson, 1967; Truax & Carkhuff, 1967) has freed counselors to the extent that constructive personality change can be viewed as a measure of the degree to which these conditions are present in the relationship. Personality change in the client is further seen as resulting from the intervention of an effective counselor. Therapist contributions--empathic understanding, genuineness, and respect--while they present ideal criteria against which effectiveness of counseling can be measured, have seldom been used as such (Jones, 1974). While it has been common practice to study how well particular interventions have been undertaken rather than to study the personal qualities of the therapist (Strupp, 1958), some progress has been made.

An attempt made to identify some of these qualities resulted in the identification of two therapist types; one more effective with schizophrenic patients known as Type A, and the other, Type B, found to be more effective with neurotics (Betz, 1962). On the strength of his findings, Betz concluded that the therapist's personal qualities were the crucial determinants of therapeutic outcome. Using this as a point of departure, Carson (1967) attempted to link the heretofore elusive quality--therapist personality--to therapist type as defined by the Whitehorn-Betz Scale (Betz, 1962). No relationship was found. It was determined, though, that A-type therapists had high interests in mechanics, while B-type therapists

had high interests in engineering. It is fortunate that these findings did not cut off this line of research for it is considered to be most promising (Jones, 1974; Myrick, Kelly, & Wittmer, 1972; Naar, 1974; Schoenberg, 1971).

A subsequent review of studies relating therapist personality to measures of the therapeutic relationship (Gardner, 1964) indicates that significant positive results occurred no more frequently than could be expected by chance. A similar review by Patterson (1967) found results of such studies to be inadequate and inconclusive.

Undaunted researchers continued. Bergin and Solomon (1970), while finding empathy to be somewhat negatively related to verbal intelligence, did establish that empathic ability was correlated negatively to the depression and psychasthenia scales of the Minnesota Multiphasic Personality Inventory (MMPI), thus verifying earlier findings (Bergin & Solomon, 1963). Others (Bergin & Jasper, 1969; Vesprani, 1969) found similar results.

A study conducted by Hekmat, Khajavi, and Mehryar (1975) found negative correlations between empathy and discomfort. An additional finding of some importance was that the index of psychopathology, as measured by the alienation subscale, correlated negatively with empathy. Empathy was also found to correlate negatively with the Edwards Personal Preference Schedule (EPPS) sub-

scales consistency, order, and intraception (Bergin & Solomon, 1963).

Therapist contributions other than empathy have also been related to the personality of the counselor. Donnan, Harlan, and Thompson (1969), using the Sixteen Personality Factors Questionnaire (16 PF), were able to show unconditional positive regard or respect to be significantly correlated with an outgoing, warm-hearted, participating personality style. Congruence was found to correlate with tendermindedness and emotionality, while trust correlated with a venturesome, socially bold, and uninhibited style. It was also found that 16 PF scores were effective in discriminating between counselors rated high and low in each of the variables studied. These findings confirm the work done earlier by McClain (1968), and Donnan and Harlan (1968).

The relationship of counselor personality to counseling effectiveness, as measured by the presence of therapist conditions in the relationship, was verified by means of 16 PF counselor effectiveness prediction equations (Cattel, Eber, & Tatsuoka, 1970). The equation was found to significantly differentiate between counselors considered good and poor according to ratings of the relationship completed by clients (Shelton, 1973). Similar results were found by Myrick, Kelly, and Wittmer (1972), and Wittmer and Lister (1971) who found significant correlations between predic-

tion equation results and supervisor ratings.

While it becomes obvious that personality variables are useful in discriminating good counselors from poor ones, there are related aspects which also hold promise as counselor screening devices. One such counselor characteristic is self-actualization.

Self-actualization, as measured by the Personal Orientation Inventory (POI) developed by Shostrom (1964, 1966), has been found to correlate significantly with the effectiveness of the high school guidance program as perceived by the students (Weinrach & Knapp, 1976). Further evidence of the usefulness of the POI in a more direct way comes from the work of Foulds (1969b), who found a direct relationship exists between the level of personal growth, authenticity, or self-actualization of the counselor and his ability to establish a therapeutic relationship with a client. Additional information (Foulds, 1969a) shows that a counselor's ability to communicate empathic understanding is related to the POI variables of: personal freedom as opposed to behavioral compliance; values associated with self-actualization versus conformity; flexibility in applying values as opposed to dogmatism; sensitivity to one's needs rather than estrangement; acceptance of one's aggression; and the ability to develop intimate relationships.

Reference to freedom, self-actualization, and flexibility carries with it reference to the less desirable characteristics of

compliance, conformity, and dogmatism. Dogmatism is a related aspect of personality worthy of consideration here, since it, like self-actualization, figures greatly in the literature on counselor effectiveness.

Dogmatism. Among the personality characteristics of psychological good health--flexibility, positive attitudes toward people, self-actualization, interpersonal skill, and openmindedness--it is the latter two which are considered to hold the greatest promise in the study of counselor effectiveness (Bergin & Garfield, 1971; Matarazzo, 1971; Naar, 1974). Interpersonal skill has been adequately enshrined in Rogers' (1954, 1957) necessary and sufficient conditions for therapeutic personality change, Carkhuff's (1969) core facilitative conditions, and Ivey's (1971) microcounseling skills, and has been referred to above. The construct of openmindedness, however, has not and needs clarification.

Openmindedness is considered descriptive of persons "characterized by a greater ability to act on the bases of information received and internal self-actualizing forces rather than irrational inner forces" (Passons & Olsen, 1969, p. 441). This conception of openmindedness does not depart significantly from that espoused by Rokeach (1960). Inherent in this definition is an implied opposing state of closedmindedness in which cognitive discrimination between beliefs and consequent action is not likely to be achieved.

This state is further characterized by an extreme resistance to change and is variously referred to as dogmatic or even authoritarian. Openmindedness and its antithesis--dogmatism or authoritarianism--are considered to be second order personality variables that can be used to differentiate effective from relatively ineffective counselors (Allen, 1967). In addition, dogmatism has been found to correlate significantly with anxiety, which is considered by Cattel et al. (1970) to be a second order personality variable (Rokeach, 1960).

Attempts to relate dogmatism to personality have been undertaken and have met with varying success. In a study of persons identified on two scales--introversion-extroversion, and neuroticism--Watson (1967) found that solutions to the Diddlebug Problem (Rokeach, 1960) by introverted neurotics were highly inflexible in nature. The difference lay not in their ability to produce novel responses but only in their ability to use these responses, thereby typifying dogmatic behavior. Vacchiano, Strauss, and Schiffman (1968) examined directly the correlation between 58 personality scales and dogmatism in an effort to establish whether a dogmatic personality could be described. They concluded that such was the case and describe the dogmatic personality as:

[A] need . . . to receive support, encouragement, and understanding from others; an intolerance for understand-

ing the feelings and motives of others; and an avoidance in changing their environment or daily routine.

The dogmatic subject lacks self-esteem . . . , is doubtful about his own self-worth, is anxious, lacks confidence in himself, lacks either self-acceptance or self-satisfaction, is non-committal and defensive, and is dissatisfied with his behavior, his physical state, his own personal worth, and his adequacy. Personality maladjustment and instability appear to underlie dogmatism.

Dogmatic subjects are low in ego strength . . . , frustrated by changeable conditions, submissive and conforming, restrained, diffident, timid, tense, impatient, and conservative and respecting of established ideas. In regard to their conservatism, the dogmatic subjects are confident in what they have been taught to believe, accept the tried and true despite inconsistencies, and are cautious and compromising in regard to new ideas, generally going along with tradition. (p. 84)

The personality profile thus established substantiates Rokeach's (1960) formation of belief systems relating to dogmatic and non-dogmatic attitudes and "extends the concept of dogmatism from an attitude system to a personality pattern" (Vacchiano, Strauss, & Schiffman, 1968, p. 85).

Criticism of the Vacchiano et al. (1968) study by Bernhardson and Fisher (1970) would have us believe that the number of significant correlations found could occur in 5% of the cases purely by chance variations. This would lead to spuriously high correlations in some instances. Because the location of these correlations is unknown, interpretation of personality correlates of dogmatism in this study are limited. Norman (1966), in support of Vacchiano et al. (1968), reports that MMPI differences between high and low dogmatic subjects reflect differences in self-esteem and general personality adjustment.

Additional support for a dogmatic personality can be found in the work of Adorno, Frenkel-Brunswik, Levinson, and Sanford (1950). It is their contention that an authoritarian person is characterized by a tendency to structure one's world cognitively in terms of one's own frame of reference, negating the varied information to be derived from the situation. This conception of the authoritarian personality approximates the Rokeach conception of the dogmatic person. It is further indicated (Gregory, 1957) that the authoritarian personality is a very insecure personality, a claim not unlike that made by Vacchiano et al. (1968) when describing the dogmatic personality.

In order to assess the authoritarian personality, Adorno et al. (1950) devised the California F Scale (F-scale). This scale

has been subjected to numerous validation studies (Christie & Jahoda, 1954) which indicate that it does tap a personality syndrome which includes dominance-submission relationships, rigidity, and lack of insight into self and others. This multidimensional scale has since been questioned.

Work by Ostrand (1976) has revealed that correlations between F-scale scores and California Psychological Inventory (CPI) dominance subscale scores were not significant, thereby not assessing adequately the dominance-submission continuum. Webster, Sanford, and Freedman (1955) believe the F-scale to be somewhat ideological, easy to fake, and less personality centered than desired. In a report of a factor analytic study of alienation, anomia, authoritarianism, status concern, and the tendency to discriminate, Knapp (1976) indicates that the F-scale tended to be contaminated by other attitudes. This lends support to the general criticism that the multidimensionality of the scale results in dimensions not consistent with the underlying theory to emerge. This contributes to the lack of consistency in reported findings when attempts are made to relate the F-scale to other variables.

When the F-scale is used in studies of high and low dogmatic persons, it appears to perform consistently. Rokeach (1960) performed two studies of students judged to be high and low dogmatic by their professors and by their peers. In the first study, where

professor ratings of dogmatism established the groups, neither the F-scale nor the Dogmatism Scale differentiated the high from the low dogmatic students. In the second study, both scales significantly differentiated between students judged high and low dogmatic by their peers. Failure to find differences in the first study is attributed to the sensitivity to the presence of authority by the dogmatic, authoritarian personality. In a supplementary study designed to investigate the similarities between F-scale and Dogmatism Scale scores, Rokeach (1960) conducted a study using 15 Michigan University students. Results showed there were no significant differences. Believing that the sample was too small for reliable conclusions to be drawn, Thompson and Michel (1972) conducted a study using 379 subjects which investigated the relationship of the F-scale to the Dogmatism Scale. Their result, $r = .64$, "is midway in the range of coefficients (.54 to .77) reported by Rokeach from his studies" (Thompson & Michel, 1972, p. 183).

We may, then, conclude that, contrary to the findings of Bernhardson and Fisher (1970), since the Dogmatism Scale and the F-scale assess the same variable which is reputed to be the authoritarian personality, a dogmatic personality such as described by Vacchiano et al. (1968) does, in fact, exist. This counselor characteristic is just one of the personality variables taken by the counselor into the therapeutic dyad which may have a profound ef-

fect on the outcome.

A counselor who is easily frustrated by changing situations, is anxious, doubts his own self-worth, and needs support, encouragement, and understanding from others (perhaps even his client), can hardly be expected to exhibit empathic understanding, genuineness, and respect in the relationship, all factors by which counselor effectiveness is assessed. It, then, becomes important to explore the research material which relates dogmatism to counselor effectiveness.

Dogmatism and counselor effectiveness. In a review of studies using indicators predictive of counseling effectiveness, Walton and Sweeney (1969) identified dogmatism as the most promising. The work done with this instrument has consistently supported its capability in discriminating between counselors on both ends of the effectiveness continuum. In a study using the Counselor Performance Rating Scale (Kelz, 1961) as the measure of counseling effectiveness, Russo, Kelz, and Hudson (1964) found that counselors rated by expert judges as most and least effective could be distinguished on the basis of their Dogmatism Scale scores. Using supervisor ratings of effectiveness, Mezzano (1969) found that persons who were low on the Dogmatism Scale were rated by supervisors as the most effective counselors. He concluded that the less dogmatic counselors are, the more genuine, accepting, and understanding they

are in the counseling relationship.

In an attempt to relate numerous personality variables, including dogmatism, to peer ratings of counselor effectiveness, Stefflre, King, and Leafgren (1962) found a confusing picture in which some of the more traditional personality variables presented results in the direction opposite to that expected. Dogmatism Scale scores were found to not only discriminate effective counselors from the less effective counselors, but in the direction expected, with the effective counselor scoring lower on dogmatism. They concluded that anxiety and dogmatism should get further use in selecting counselors. Cahoon (1962) also found significantly less dogmatism in counselors rated as superior by peers. It is reported by Kemp (1962) that low dogmatism scores were related to increased permissiveness in the counseling situation.

In studies using constructs similar in nature to dogmatism, the result has been the same. Jackson and Thompson (1971) found counselors judged effective by supervisors were significantly more positive in their attitudes toward self, most people, most clients, and counseling. Tolerance for ambiguity has been found to be significantly related to supervisor ratings of high effectiveness (Brams, 1957). Cognitive flexibility is reported by Sprinthall, Whiteley, and Mosher (1966) to be a critical concept relating to counselor competence; the more flexible, the more competent the

counselor.

Dogmatism does not appear to be a personality variable unaffected by counselor education programs, as Mezzano (1969) reports. He concludes that the dogmatism scores of counseling students can be lowered over the course of their training. Similar results are reported by Kemp (1962). The implications for counselor selection and counselor training become obvious.

The focus of the discussion has been the counselor and how dogmatism influences one's ability to provide the facilitative conditions necessary for counseling to take place. One is reminded that the statement that those who are highly dogmatic do not approach new experiences openly since they are defensive, insecure, and more threatened (Kemp, 1961) applies not only to counselors but to clients as well. The degree to which the client perceives the facilitative conditions in the relationship may be affected in a similar way by dogmatism, since both parties contribute to counseling in an almost equal fashion. Leary (1955) has indicated that "interpersonal relationships can never be fully understood unless both sides of the interaction are studied. When only one side, the self or subject side, is studied or isolated, there is risk of distortion" (p. 156).

Although numerous studies of counselor personality and its effect on counseling have been undertaken, few have studied coun-

selor-client variables jointly (Hebert, 1967; McGowan & Schmidt, 1962). The joint study of counselor-client personality variables involves a matching process on a similarity dimension and the assessment of the relationship that exists under each condition of counselor-client similarity.

Client-Counselor Similarity

In establishing necessary and sufficient conditions under which therapeutic personality change can take place, Rogers (1957) provides for a continuum of interaction whereby the greater the degree to which therapist empathy, unconditionality of regard, and congruence exist in conjunction with client incongruence and ability to perceive the therapist dimensions, the greater the probability for therapeutic personality change to occur. This establishes an interactive system which integrates the therapist and client into a therapeutic relationship where a balancing and a mutuality of contribution to that relationship can be achieved. Fostering such a balance in a human relationship can be thought of as an equalizing process. This process also involves a continuum. An equalized relationship is considered to be productive while an unequalized one is unproductive (Boy & Pine, 1976). In the equalized relationship, the client is more able to sense his similarity to the therapist and greater progress toward positive behavior

change can be achieved.

Equalizing, or increasing client/counselor similarity in interpersonal relationships, appears to have merit. Luborsky, Chandler, Auerbach, Cohen, and Bachrach (1971) report in their review of psychotherapeutic outcome research that higher client educational level is a good prognostic sign. If one were to explain this phenomenon in terms of equalization, it becomes apparent that the higher the client's educational level, the more similar he senses himself to be to his therapist, and hence is prepared to devote more effort into making the relationship work, thereby increasing the probability of favorable outcome.

Research studies of client-therapist similarity treat a variety of factors. Holzman (1961) found that, for outpatients, improvement in social adaptation was significantly associated with increased patient-therapist similarity on value judgments. Cook (1966) reports that similarity of therapist-client values results in an apparent curvilinear relationship to changes in evaluative meaning regarding education and occupation. Snyder (1961) has shown that similarity of client-therapist values is good for the relationship, and Preckner (1952) indicates that value similarity enhances opportunities for effective client-therapist communication, thereby increasing chances for client change. In a study relating social class and values to duration of psychotherapy,

Pettit, Pettit, and Welkowitz (1974) found that the more similar patients were to their therapists, the longer they stayed in psychotherapy.

In their research into the relationship between social class similarity and therapy, Hollingshead and Redlich (1958) indicate that similarity of the client's and his therapist's social background is a basis for a good therapeutic relationship. Contradictory results are presented by Wakefield and Snell (1975), who report that, while similarity of social background is not important to the therapy process, occupation, as a subset of social class, is. These results lend credibility to the argument proposed by Vontress (1969) that similarity of cultural, ethnic, and social class may be important in establishing a relationship with clients he has termed alienated. It is indicated (Mitchell & Nameneck, 1970) that not much research in this area has been undertaken.

Carson (1969) introduces another aspect of client-counselor similarity in a construct he calls complementary interactions. It is expected that a particular client behavior, referred to as an elicitation, will, with high probability, be followed by a specific counselor behavior, referred to as a response, thereby forming an elicitation-response sequence. These high-probability interactions are termed complementary. Successful client change is related to the therapist's ability to respond in a relatively non-

complementary disconfirming manner to the client's elicitations (Beier, 1966; Carson, 1969; Haley, 1963; Halpern, 1965). This contention was tested in a study conducted by Dietzel and Abeles (1975). The result was that no significant differences were found between therapist and client complementarity for different outcome groups.

In a study which appears to contradict the premise that similarity of client and counselor variables leads to favorable outcome, Lesser (1961) reports that dissimilarity determines progress, a conclusion derived from the finding that client-therapist self-concept similarity was significantly, although negatively, related to outcome. In a study somewhat unrelated to counseling per se, Grush, Clore, and Costin (1975) showed that liking for a person (in this case, teacher) by another (here, students) is significantly related to the degree of dissimilarity between student and teacher on selected personality traits.

It was stated above that counselor personality is a significant factor in the counseling relationship. It further becomes evident that client/counselor similarity on some specific dimensions is also important, although the results tend to be somewhat diverse, depending on the variable being assessed. If counselor personality is of importance in the relationship with a client, it follows that client personality should be equally important. Sev-

eral studies have addressed the mutual contribution of counselor and client personality to the therapeutic relationship by considering the degree of similarity between the parties involved. Again, the results are not consistent.

Using the Myers-Briggs Type Indicators (MBTI) (Myers & Briggs, 1943), Mendelsohn and Geller (1963) studied client-counselor similarity on selected personality dimensions and how that similarity related to duration of counseling. The results showed that as similarity increased, the number of sessions attended by the clients increased. They conclude that client-counselor personality similarity has an effect on the outcome of counseling. In a subsequent study (Mendelsohn, 1966) designed to verify the previous findings, the MBTI was administered to both counselors and clients involved in the study. Indices of similarity were computed, three groups were formed, and their relationship to duration of counseling was studied. Results showed that counselor-client similarity was positively associated with longer duration of counseling. The relationship is described as being mildly curvilinear. Additional research designed to study the relationship between similarity, missed sessions, and early termination of counseling (Mendelsohn & Geller, 1967) showed that clients who failed to appear for counseling were significantly more similar to their counselors on MBTI personality profiles. It was concluded that, because of variabil-

ity in similarity measures, dissimilarity is a more effective predictor of counseling duration.

In a 1962 study, Carson and Heine had hypothesized that, with very high similarity, suitable therapist distance and objectivity would be difficult to maintain, whereas in the case of great dissimilarity the therapist would not be able to empathize with or understand the client's problem. In either case, therapeutic progress would be inhibited. Their study was able to support the existence of a curvilinear relationship when the MMPI is used as the personality indicator. Similarly, Gerler (1958) found medium similarity in personality traits of counselor and client to be more conducive to favorable outcome. A replication of the Carson and Heine (1962) study was undertaken by Lichtenstein (1966) with the result that no relationship between similarity measures, based on personality variables, and success was found. Similar findings were obtained in a replication attempt by Carson and Llewellyn (1966). It is significant that the Mendelsohn (1966) study was able to show mild curvilinearity. This finding supports the contention (Carson & Llewellyn, 1966; Cronbach, 1955, Lichtenstein, 1966) that perhaps the global personality similarity measures used are not sophisticated enough to detect relevant differences.

In an attempt to correct these methodological difficulties, Bare (1967) conducted a study in which she correlated client and

counselor personality, assessed by the EPPS, the Gordon Personal Profile, and the Gordon Personal Inventory, and similarity scores to client and counselor ratings of counseling success. Results showed again that dissimilarity of counselor-client personality was more frequently associated to counseling success than similarity.

Wogan (1970) engaged in a study to examine personality similarity between therapist and client as a source of influence on therapeutic outcome. Outcome measures were obtained by rating scales completed by the therapist and the client, and client-therapist similarity was calculated using MMPI profile scores. Therapeutic outcome measures were found to be positively related to therapist level of anxiety and negatively related to therapist level of repressiveness. Increasing similarity between patient and therapist was found to be negatively related to outcome.

Bare (1966), in a study designed to investigate client-counselor communication and how personality similarity may influence this communication, showed that similarity on some personality traits and dissimilarity on others increased counselor understanding of the client.

Vogel (1961) conducted a study using authoritarianism as a personality variable in the client-counselor relationship. He hypothesized that similarity of therapist and client on this trait

is related to the establishment of good or successful therapeutic relationships. The hypothesis was substantiated. A similar finding is reported in Tuma and Gustad (1957). Results of a study conducted by Tosi (1970), in which dogmatism levels of counselors and clients were investigated, showed client ratings of the relationship to become higher as more openness occurred in the dyad. An inverse relationship between ratings of the relationship and dogmatism levels was found to exist.

A variety of researchers have correlated treatment outcome with client-therapist value similarity (Cook, 1966; Holzman, 1961; Preckner, 1952; Snyder, 1961), social class similarity (Hollingshead & Redlich, 1958; Pettit, Pettit, & Welkowitz, 1974; Wakefield & Snell, 1975), self-concept similarity (Lesser, 1961), and personality similarity (Bare, 1966, 1967; Carson & Heine, 1962; Carson & Llewellyn, 1966; Gerler, 1958; Lichtenstein, 1966; Mendelsohn, 1966; Mendelsohn & Geller, 1963, 1967; Tosi, 1970; Tuma & Gustad, 1957; Vogel, 1961; Wogan, 1970), and have found a variety of results which indicate that some similarities enhance good relationships and therapeutic change, while others impede the attainment of therapeutic goals. Others have concluded that moderate therapist-client similarity leads to more success than either strong similarity or dissimilarity.

Let it suffice to say that, for many purposes, it may be more

useful to consider the match between therapist and client than the ways in which they are similar or dissimilar (Levinson, 1962), for it is possible to predict which therapists the patients will view as more favorable when client and therapist personalities are matched (Gassner, 1970). Matching of correctional counselor and delinquent would be one means of deriving the best results possible by making the most intelligent use of each member's abilities (Geis & Woodson, 1956). Such a project has been undertaken in California. Matching in this experiment (Palmer, 1973) refers to preferential assignment of certain types of clients to specific types of treatment personnel. Matching is based on personality and professional characteristics that have been organized into checklists. The youths are also classified in terms of symptomatic behavioral descriptions. One distinct advantage of this matching system is the planned avoidance, or negative matching, of specific worker-client combinations.

The fundamental reason underlying a similarities or matching approach in any counseling setting, but more particularly a prison setting, is that invariably the middle-class-oriented counselor and the culturally deprived, psychologically disorganized, socially inept client internalize different social class values and moral codes which manifest themselves in terms of differing aspiration levels, beliefs, and expectations. The artificiality of the coun-

selor-client relationship that occurs when the middle-class value structure of the counselor comes into contact with the lower-class value structure of the client constitutes what Sherif and Sherif (1965) refer to as dissonance. Not only is there dissonance in the value structures but also in the perceptions each has of the evaluative process. It appears that "the more dissimilar the client's pretherapy conception of an ideal relationship was from that of therapists and other clients, the more successful the therapy itself" (Snyder, 1961, p. 274). It would then seem that dissonance is a therapeutic variable in counseling.

Cognitive Dissonance

In numerous ways, comparisons are drawn between people, within people, or even against some standard or norm. This continual search for standards against which to make such comparisons implies that the standards exist not only frequently, but consistently, over time. Not only do people seek out consistency in others but they actively strive for self-induced internal consistency. The opinions, attitudes, and even behaviors used in describing a person tend to exist in clusters which are themselves internally consistent. Moreover, there is a consistency between what a person knows or believes and what he does (Festinger, 1957).

On the other hand, people often behave in ways which do not reflect appropriately what they know, believe, or have opinions

about. An element of consistency no longer exists in such cases and the resulting behavior may be termed inconsistent with the beliefs, opinions, and knowledge known to have existed previously. Because people tend to strive toward consistency, a condition of psychological discomfort may be considered to exist in circumstances where inconsistencies abound. Festinger (1957) has chosen to refer to these inconsistencies of beliefs, opinions, and knowledge by the term dissonance. When consistency exists, a condition of consonance is established. Using these fundamentals as a basis for his theory, two hypotheses were developed:

1. The existence of dissonance, being psychologically uncomfortable, will motivate the person to try to reduce the dissonance and achieve consonance.
2. When dissonance is present, in addition to trying to reduce it, the person will actively avoid situations and information which would likely increase the dissonance.

(Festinger, 1957, p. 3)

Further, "any knowledge, opinion, or belief about the environment, about oneself, or about one's behavior" (Festinger, 1957, p. 3) is considered to be a cognition. Dissonance, then, becomes a term used to refer to the existence of inconsistencies or nonfitting relations among cognitions. In this way, the term cognitive dissonance is conceptualized.

Dissonance is seen as an uncomfortable psychological state which is therefore considered to have motivating properties, and cognitive dissonance is an antecedent condition which leads to some form of activity designed to establish the more comfortable state of consonance (Festinger, 1957). This theoretical formulation is not fundamentally different from how client incongruence functions as a necessary and sufficient condition for personality change (Rogers, 1957). It would, however, appear to be somewhat more parsimonious, in that change is achieved by cognitive dissonance reduction. The only necessary condition that need be fulfilled is that cognitive dissonance exist.

In addition, therapeutic change could conceivably exist with or without the intervention of a counselor, for cognitive dissonance can be reduced by simply adding to or changing one's behavior and/or knowledge. Aronson (1972) presents these strategies as (a) adding new cognitions, (b) changing existing ones, and (c) adding new behaviors. However, difficulties may be encountered in achieving the changes indicated. These difficulties would occur if the individual does not have sufficient control over his environment or if the individual's mental processes are such that new cognitions cannot easily be formed. Again, considerable similarity exists between the Festinger (1957) and Rogerian (1942) viewpoints regarding when external intervention would be warranted.

Rather than to continue to refer to cognitive dissonance in global terms as has been done to this point, it becomes necessary to adopt the more formal definition of cognitive dissonance proposed by Festinger (1957) so that adequate development in the context of this study can be achieved.

Dissonance and consonance, as we know, refer to relations between cognitions, which are "the things a person knows about himself, about his behavior, and about his surroundings" (Festinger, 1957, p. 9). These cognitions are heretofore to be referred to as elements, some of which:

Represent knowledge about oneself: what one does, what one feels, what one wants or desires, what one is, and the like. Other elements of knowledge concern the world in which one lives: what is where, what leads to what, what things are satisfying or painful or inconsequential or important, etc. (Festinger, 1957, p. 9)

Two elements, then, are dissonant if they do not fit together, the obverse of one following from the other, and the magnitude of the dissonance so created is a function of the relative importance of the elements. It is this magnitude of dissonance which determines the pressure to reduce dissonance. Dissonance, then, "acts in the same way as a state of drive or need or tension" (Festinger, 1957, p. 18).

Some elements are more resistant to change than others, in much the same way that some behaviors are resistant. Taking this into consideration then, the maximum dissonance that can be created is equal to the total resistance to change of the least resistant element.

Relation to counseling. Several parallels to the phenomenological-perceptual approach to counseling as espoused by Rogers (1957) can be identified in cognitive dissonance theory: (a) The client experiences dissonance (incongruence). (b) When difficulties in the resolution of dissonance are encountered, an appropriate intervention by a counselor is warranted. These parallels were also noted by Mayer and Cody (1968) in their integration of aspects of cognitive dissonance theory with a Rogerian orientation which they then applied to school counseling. The remaining necessary and sufficient conditions can be satisfied, in that they refer to counselor-proffered skills and the client's ability to perceive same.

In a study comparing the ability of cognitive dissonance theory and social judgment theory (Sherif & Hovland, 1961) to predict outcome of psychotherapy, Beutler (1971) found that the former was better able to predict attitude changes resulting from psychotherapeutic intervention than the latter.

Since cognitive dissonance occurs in a social context involv-

ing the individual's environment, social adaptation, and learning, there necessarily exist parallels to the theoretical formulations of Bandura (1971) and Rotter (1954), as espoused in the social learning approach to psychotherapy. In cognitive dissonance theory, there is a strong emphasis on beliefs, opinions, and associated behavior change. The analysis of beliefs and their change form the basis upon which the trait-factor, or rational approach to counseling, is developed (Ellis, 1973).

While similarities to existing theories of counseling can be identified, there is not yet enough evidence to support any claims designed to promote cognitive dissonance theory as a counseling theory. However, there are enough elements common to accepted counseling theories to warrant the premise that there is a place in counseling for cognitive dissonance. It remains to demonstrate that cognitive dissonance constructs can be used to provide a link from counseling to the seemingly incompatible construct of authority.

Relation to authority. It has been a position taken by this paper that, contrary to opposing beliefs, authority and counseling are not mutually incompatible. Since cognitive dissonance is held to have a place in counseling, it is my intention to show how the construct of authority can function within the context of cognitive dissonance.

While some people can be induced to make public statements regarding opinions or beliefs that are in opposition to their convictions, it is often doubtful that the public compliance is accompanied by private change of opinion or beliefs. Public compliance may occur if:

1. The compliance is brought about mainly through the exertion of a threat of punishment for noncompliance, the individual against whom the threat is directed being sufficiently restrained from leaving the situation.
2. The compliance is brought about mainly through the offer of a special reward for complying. (Festinger, 1957, p. 85)

These principles figure prominently in the Aronson and Carlsmith (1963) study of the effect of severity of punishment on the behavior of children. Using the forbidden toy paradigm, the authors varied the severity of threat by the experimenter's admonition not to play with a toy previously indicated as favored. Two levels of threat--severe and mild--related to the consequences of transgressing were established in this manner. Results showed that all children, when given an opportunity to play with the forbidden toy, refrained from doing so. For those who had experienced mild threat, the toy had not become any less attractive, but the

children were able to justify not playing with the toy by convincing themselves that they didn't really like it and, therefore, refrained from playing with it. The severe threat group was able to find good external justification for their action and, thus, did not have to change their private cognitions about the toy. This study was replicated on no less than seven occasions (Carlsmith, Ebbesen, Lepper, Zanna, Joncas, & Abelson, 1969; Ebbesen, Bowers, Phillips, & Snyder, 1975; Freedman, 1965; Lepper, Zanna, & Abelson, 1970; Ostfeld & Katz, 1969; Pepitone, McCauley, & Hammond, 1967; Turner & Wright, 1965) with consistently similar results.

In a study by Festinger and Carlsmith (1959), subjects were required to spend an hour performing a tedious task. When the task was complete, they were told a largely falsified cover story regarding the purpose of the study. One experimental group was paid \$1 and a second group paid \$20 to take the place of a supposed experimenter who had failed to appear. It was the task of the members of both experimental groups to lie about the nature of the task to be performed by saying that the boring, tedious task was in fact a "lot of fun." The subjects who were paid \$1 could not excuse their perjury and they consequently had to eliminate the lie by changing their attitude to fit their statement. The more adequately paid group was able to continue to think of the task as dull because their pay was large enough to justify the lie.

Aronson and Mills (1959) demonstrated that, in the experience of pain or the exercise of great effort in the pursuit of a desirable goal or object, there is a tendency to view the goal as especially attractive. The experimenters manipulated severity of initiation to group membership, the severe condition requiring the reading of some embarrassing material before joining the group, while the mild condition required reading material not of an embarrassing nature. The subjects then were expected to take their place in the group but not to join in the discussion of a topic of a sexual nature. Audio was provided by tape-recorded messages to earphones. After the session, subjects were asked to rate the discussion and the group members. Girls who experienced the severe initiation condition rated group members and discussion higher than the mild condition girls.

It becomes apparent that too great a reward or punishment will result in only a little dissonance, whereas a small reward or mild punishment will result in dissonance and its attending reduction by compliance. Thus, if one is to induce public change as well as private change of opinion or belief, the best way to do it would be "to offer just enough reward or punishment to elicit the overt compliance" (Festinger, 1957, p. 95).

An extensive review of therapeutic compliance has been compiled (Davidson, 1976) which portrays the range of situations in

which compliance, private and/or public, takes place. One may conclude, then, that authoritative relationships, as manifested in induced or forced compliance, can be achieved in counseling such that an optimal amount of dissonance is produced which then results in both private and public compliance. The problem of how to define this optimal level still exists, but perhaps matching counselor and client on the authority dimension, as manifested in the construct of dogmatism, may serve some useful purpose.

Relation to matching. Psychological literature abounds with references to the several types of approach avoidance conflicts. It is interesting to note that, when conflict between alternatives is reduced by the making of a choice between the alternatives, subjects experience dissonance. For instance, in the case of decision-making between completely negative alternatives, the mere presence of those alternatives does not lead to dissonance but, once a choice is made, one finds that there are some cognitive elements which will be dissonant with the cognition about the action taken. In interactions with people and the environment, the most frequently occurring situation involves the case where a decision is to be made between two alternatives, both of which have positive and negative aspects. In these cases too, dissonance will result once a choice is made. A situation where decisions involving more than two alternatives must be made is also frequent-

ly encountered. In this case, as with the others, "all those elements that, considered alone, would lead to action other than the one taken are dissonant with the cognitive elements corresponding to the action taken" (Festinger, 1957, p. 36).

In choice situations involving several alternatives, the magnitude of the dissonance created involves (a) the importance of the decision for the individual, and (b) the relative attractiveness of the unchosen alternative. It follows that the greater the relative attractiveness of the unchosen alternative(s), as compared to the chosen alternative, the greater the proportion of relevant elements that are dissonant with the cognition corresponding to the action taken. The relationship between magnitude of dissonance and the relative attractiveness of the unchosen alternative, given a particular level of attractiveness and importance of the chosen alternative, is presented in Figure 1 and represents a steadily increasing function (Festinger, 1957).

Pressure to reduce dissonance, while it has motivating properties related to arousal levels, varies directly with the magnitude of dissonance. This relationship is graphically presented in Figure 2, which shows that as dissonance increases so does arousal.

We know that in choice situations involving two alternatives as the attractiveness of one of the choices increases, the attrac-

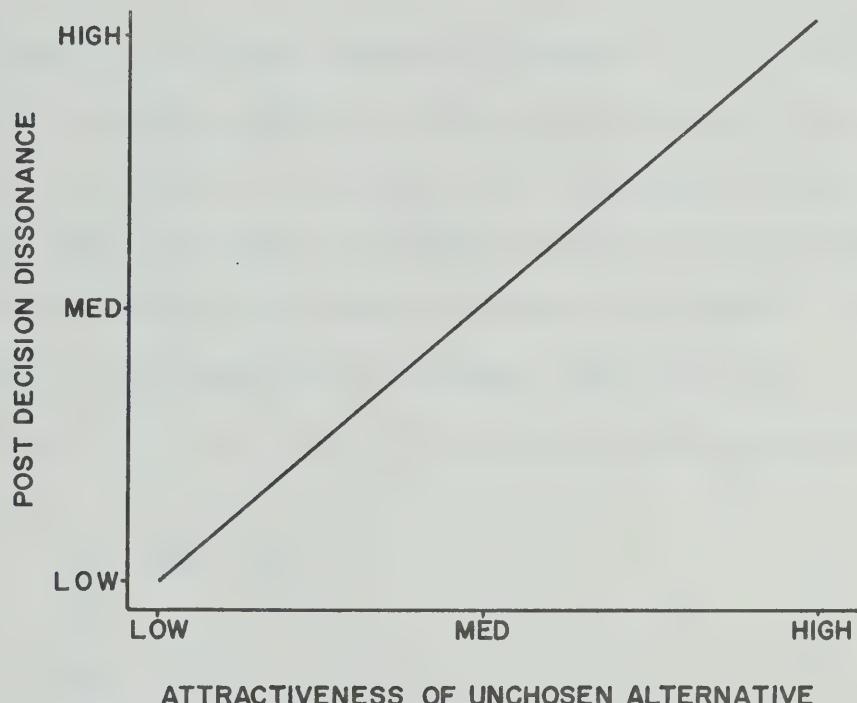


Figure 1. Relationship between attractiveness and dissonance.

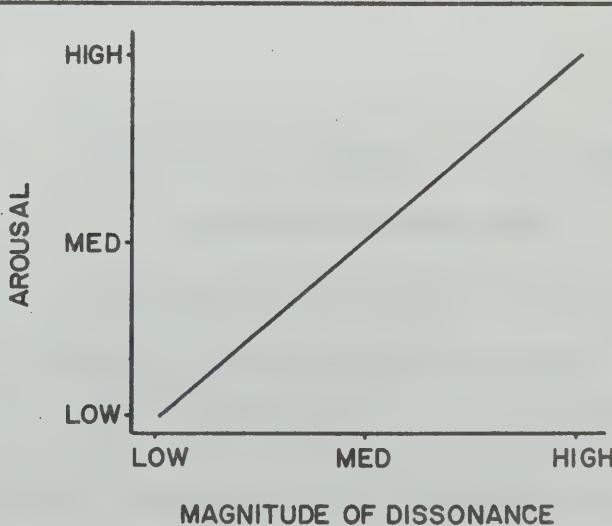


Figure 2. Relationship of magnitude of dissonance to arousal.

tiveness of the other necessarily decreases. If, as Festinger (1957) indicates, increases in the attractiveness of the unchosen alternative result in increases in the magnitude of dissonance, it would seem reasonable to conclude that the associated decrease in attractiveness of the chosen alternative also results in an increase in the magnitude of dissonance (see Figure 3).

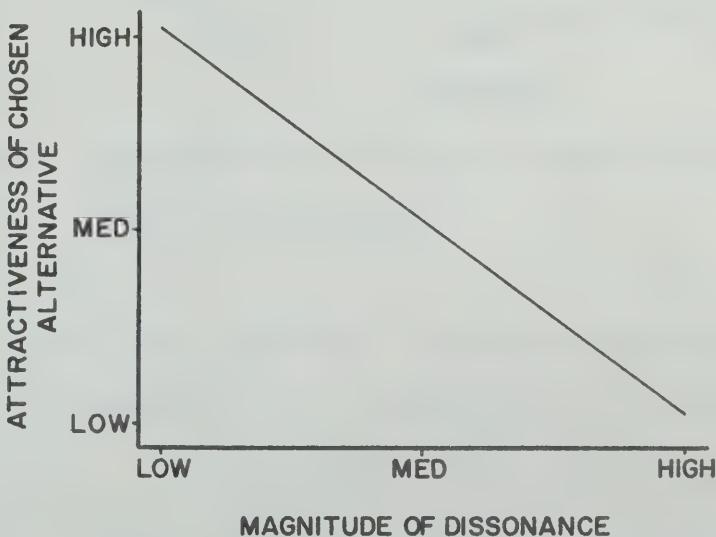


Figure 3. Relationship of magnitude of dissonance to attractiveness of the chosen alternative.

It follows that, since increases in the magnitude of dissonance are directly related to increases in arousal, as a manifestation of the pressure to reduce dissonance, Figure 4 results.

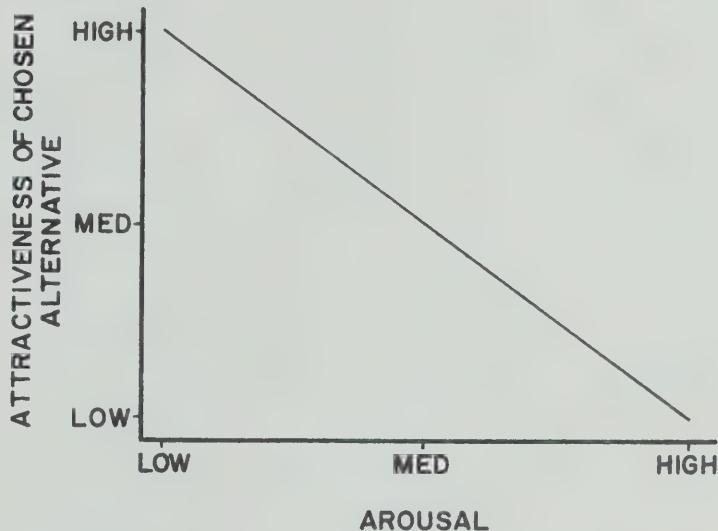


Figure 4. Relationship of the attractiveness of the chosen alternative to arousal.

Berlyne (1963) postulates a decreasing monotonic relation between the attractiveness of a situation and the arousal that results from it. It can be seen that this relationship, presented in Figure 5, is not appreciably different from the one presented in Figure 4.

The arousal Berlyne (1963) refers to is related to a drive in much the same way as Festinger's (1957) concept of dissonance is related to a drive. For Berlyne (1963), states of high arousal can be aversive and their reduction is welcomed; on the other hand, reduction of dissonance is also satisfying. Berlyne (1963) intro-

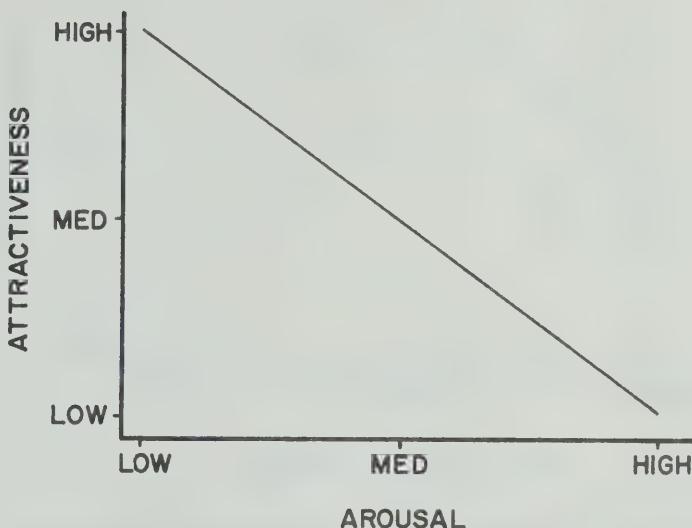


Figure 5. Relationship between attractiveness and arousal.

duces the construct of arousal potential, by which he means "all those variables, including collative properties of stimuli, with which arousal, in most conditions, increases" (p. 317). The relationship between attractiveness and arousal potential is considered to be curvilinear, as depicted in Figure 6.

In referring to collative properties of stimuli, Berlyne (1963) refers to such properties as "novelty, surprisingness, change, ambiguity, incongruity, blurredness, and power to induce uncertainty" (p. 290). The latter property--the power to induce uncertainty--is not substantively different from what is embodied in cognitive dissonance theory; therefore, it follows that attrac-

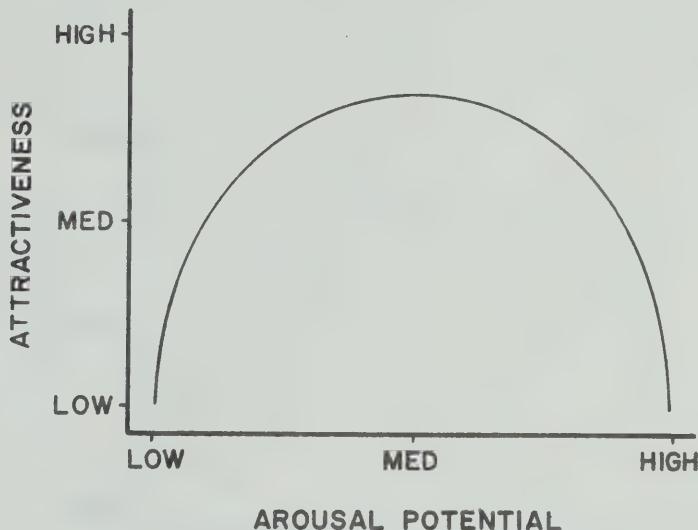


Figure 6. Relationship between arousal potential and attractiveness.

attractiveness is curvilinearly related to cognitive dissonance, as presented in Figure 7. It can be seen that as cognitive dissonance increases, so does attractiveness up to a point where further increase in dissonance results in a decrease in attractiveness. This proffers an explanation for the findings in the forbidden toy paradigm (Aronson & Carlsmith, 1963; Carlsmith, Ebbesen, Lepper, Zanna, Joncas, & Abelson, 1969). It also provides a means whereby client-counselor similarity can be related to cognitive dissonance, since similarity may be construed as a measure of attractiveness.

Resolution of cognitive dissonance experienced by the client in counseling is considered as one of the goals of the interpersonal process, just as is the reduction of incongruence. The degree

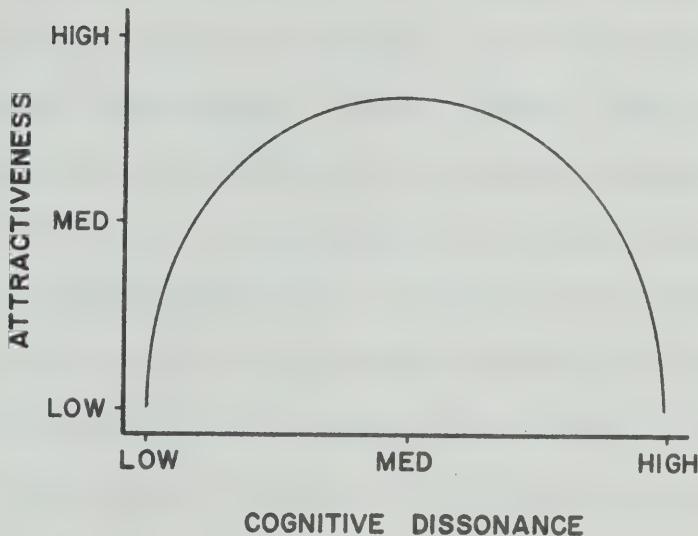


Figure 7. Relationship of cognitive dissonance to attractiveness.

to which cognitive dissonance is resolved provides a ready means whereby therapeutic outcome may be assessed. There are several techniques by which outcome can be assessed, some of which must be explored at this juncture.

Assessment in Counseling

The study of outcome. In his theoretical formulations regarding counseling, Rogers (1957) makes, as the central theme of client-centered therapy, the existence of six conditions which he considered as necessary and sufficient to the achievement of therapeutic personality change, a mandatory condition. It is further indicated

that the satisfaction of each of these conditions establishes a situation in which "the initiation of a process" (Rogers, 1957, p. 140) can be undertaken. This process could conceivably be any psychotherapeutic intervention. In this context, then, counseling may be considered to consist of two interrelated stages: (a) the initiation of the helping relationship, and (b) the process by which the relationship of helping is served. It is conceivable, therefore, that studies of an evaluative nature can be undertaken which treat the formation of a counseling relationship and others which treat the results or outcome of the therapeutic process chosen.

Outcome studies are conducted to determine the effect of the overall treatment, thereby establishing the ways in which the client has changed (Levinson, 1962). For the reason that there are many dimensions along which a client could change, there are potentially an equal number of outcome studies possible. Fortunately, some dimensions appear to be more useful than others. Client characteristics are thought to have less bearing on outcome than do the personal qualities and technical competency of the counselor (Weiner, 1975). However, some client characteristics have been identified that seem to increase the likelihood of favorable therapeutic outcome. These are: (a) adequacy of general personality functioning--the healthier the client to begin with, the

better the outcome; (b) the amount of motivation and/or expectation tends to be positively related to outcome--the higher the motivation, the better the outcome; (c) clients with higher initial intelligence performed better in psychotherapy; (d) almost any client affect, but particularly depression and anxiety, is related to outcome--the higher the affect, the better the outcome; (e) younger clients tend to perform better in psychotherapy; (f) clients with higher social achievements are better suited to psychotherapy; and (g) liking a client may provide favorable conditions for growth (Luborsky, Chandler, Auerbach, Cohen, & Bachrach, 1971). These client characteristics were synthesized by Weiner (1975) into: (a) The client presents himself to psychotherapy with a minimal generalized personality disturbance but experiences a high level of distress. (b) The client is motivated to receive psychotherapy and believes that treatment will result in a change in feelings or behavior. (c) The client is a likable person with a good capacity for expressing and reflecting on his experiences. Two other characteristics--intelligence and level of social functioning--are accorded much less importance in the consideration of psychotherapeutic outcome.

In addition to the client characteristics above, Luborsky et al. (1971) present counselor skill, experience, and interest pattern; the client-counselor match; and the length of treatment as

being positively related to outcome.

Inherent in the above discussion is the premise that what constitutes outcome is known. Grummon (1965) indicates that there is a difficulty in this domain, particularly where attempts are made to differentiate clearly between what is an outcome study and what is a process study. Definitions of these terms do exist. Luborsky and Strupp (1962) state: "Studies of outcome were those that asked the question: what changes took place in treatment process studies asked the question how change came about" (p. 309). Outcome studies use client or observer ratings of improvement or pre-post psychological testing to achieve their goal, while process studies typically examine the records of treatment. This distinction is echoed by Kiesler (1971) and Paul (1967), who suggest that outcome research should be directed towards replying to "what treatment, by whom, is most effective for this individual with that specific problem, and under which set of circumstances" (Paul, 1967, p. 111) type questions. Kiesler (1971) and Mitchell (1969), however, express regret that the confusion between what is process and what is outcome results in a failure to identify such pertinent phenomenon as, whether a curvilinear relationship might exist even though significant pre-post differences are not found, and that any differences that do exist may only be chance fluctuations due to the unreliability of the measures used.

Others, too, have had negative comments about the outcome of psychotherapy. Eysenck (1952, 1966) concludes that the research studies fail to support the hypothesis that psychotherapy facilitates recovery from neurotic disorder. It would appear that some progress is being made regarding the quality of outcome studies. In a review of 80 studies, Kellner (1967) concludes somewhat optimistically that "there is evidence to suggest that different methods of therapy lead to changes of a different kind and different methods are probably appropriate in different conditions" (p. 349). This position is supported by Bergin (1971) who, on the basis of his own review of 57 outcome studies conducted between 1952 and 1969, concludes that psychotherapy "works" (p. 229). If one is to ascertain how well it works, one must study the various means whereby measures of psychotherapeutic outcome can be obtained, with particular references as to who provides such data.

Sources of Data

Research designed to determine the effect of overall therapeutic treatment may be considered to fall under the rubric of counseling effectiveness studies. The focus is often on the counselor, for it is primarily the counselor's ability to create an atmosphere, by fulfilling the six necessary and sufficient conditions, in which counseling can be initiated. If such an atmosphere is created, the chances of the client remaining in the help-

ing relationship for a longer period and thereby benefiting from counseling are enhanced (Luborsky et al., 1971). Just how this effectiveness is to be determined presents a rather thorny problem which results from the general lack of agreement among practitioners and investigators, as well as clients, as to what constitutes effective counseling (Paul, 1967). The most frequent "measure of outcome" (Garfield, Prager, & Bergin, 1971, p. 307) has been a global judgment or rating of improvement in the client's condition made by the therapist. Such judgments are subjective (Garfield et al., 1971; Lichtenstein, 1971; Paul, 1967) and have certain limitations which will be elaborated upon in a later section of this paper.

Not only do counselor ratings form the basis of data in outcome studies, but supervisor, counselor's peer, and client ratings contribute useful data (Shertzer & Stone, 1968). Other sources of outcome data are coached client ratings (Gilberts & Freehill, 1972; McIlvaine, 1972) and third party ratings (Lichtenstein, 1971). The data obtained may be considered to be internal or external to the counseling relationship, depending on who provides the ratings (Shertzer & Stone, 1968). Ratings by supervisors, counselor's peers, or third parties fall into the latter classification, while coached client and client ratings fall into the former. Each will be treated in turn.

Supervisor ratings. Counselor performance is assessed in a number of ways by supervisors. These methods range from recording perceptions of counselor functioning in areas somewhat unrelated to the counseling function, such as parent and staff consulting (Bartlett & Thompson, 1971), and overall performance in a school setting (Dilley, Foster, & Bowers, 1973), to the more exacting supervision involved in such direct methods as Interpersonal Process Recall (Kagan, Krathwohl, Goldberg, Campbell, Schuble, Greenberg, Danish, Resnikoff, Bowes, & Bondy, 1967) or other forms of role playing, the use of one-way mirrors, criticism of taped interviews (Poling, 1968a, 1968b) and rating scales (Bishop, 1971).

The results are neither consistent nor conclusive. However, what does become evident is that some change occurs in counselors during supervision that results in their becoming more effective with their clients (Hansen & Warner, 1971).

In a study designed to identify characteristics of effective counselors, Wicas and Mahan (1966) obtained independent ratings of teams of counselors by the professional leader and by team members along the dimensions: (a) warmth of the counseling relationship; (b) understanding client behavior dynamics; (c) knowledge of counseling and personality theory; and (d) skill of counseling techniques as judged from interactions with four clients who were seen an average of 15 hours. Results showed that, when the two highest-

and two lowest-ranking counselors were identified from professional ratings, there was substantial agreement with peer rankings. The rankings were not compared statistically so, although similarity of rankings appears to exist, the interpretation that peer rankings were equivalent to professional ratings would be risky at best.

The study conducted by Dilley, Foster, and Bowers (1973), designed to identify if counselors required teaching experience to function adequately in a school setting, asked that principals, counselor supervisors, pupil personnel colleagues, and teachers compare each counselor against recalled perception of a former first-year counselor along five dimensions, one of which was overall performance. The results showed that as many counselors with, as without, teaching experience were seen as being more effective than the conceptual model. No statistical testing of differences was undertaken, so the results remain inconclusive.

In an effort to study the ability of counselors to predict whether students would graduate, Watley (1967) conducted a study which compared the predictions of counselors ranked high, moderate, and low on general counseling effectiveness by their supervisors. Results showed that the ability to predict success was positively related to the supervisor ratings of effectiveness. Moreover, since prediction is basic to counseling and effective counselors

should predict accurately (Watley, 1967), one could infer from this study that supervisor ratings do differentiate effective from less effective counselors.

Trotzer (1976) designed a study to investigate differences in ratings of counseling dimensions made by counselors, counselor educators, and graduate students in counseling. Twenty 3-minute video-taped segments drawn from the middle third of 10 counseling interviews were used as the stimulus elements. Subjects were asked to rate each segment on a 6-point continuum from strongly disagree to strongly agree. Results showed no significant differences to exist among the ratings of the counselors, counselor educators, or graduate students.

The perceptions of counselors, clients, and supervisors were compared with regards to counseling effectiveness as measured by a standard rating instrument--the Counseling Evaluation Inventory (CEI)--in a study conducted by Bishop (1971). The CEI (Linden, Stone, & Shertzer, 1965) provides an indication of counseling effectiveness on three dimensions, one of which--client satisfaction--was used in this study. If, as the results of this study showed, the supervisor and counselor ratings of client satisfaction do not differ from one another but do differ significantly from client ratings of the same dimension, it is possible that neither counselor nor his supervisor has an accurate perception of a client's

satisfaction with counseling (Bishop, 1971).

In cases such as the above study where the results are not consistent, it is customary to assume that the client was wrong (Horenstein, Houston, & Holmes, 1973). These authors surmised that, in such cases, assessment by independent judges is in order. A study was conducted so that scores reflecting (a) the client's perception of his problems, (b) independent expert judges' perceptions of the client's problems, and (c) the therapist's perception of the client's problem, were obtained at the beginning and at the end of therapy. Results showed that the correlation between client and therapist perceived disturbance change scores did not approach statistical significance. In contrast, however, the correlation between client and expert judge perceived disturbance change scores did attain significance, leading Horenstein, Houston, and Holmes (1973) to conclude that the counselor, when in doubt about progress, can rely on client reports of progress in the therapeutic process.

It is apparent that ratings of client progress by supervisors or experts in counseling suffer from a certain inconsistency, which might tend to cause premature termination of a particular line of investigation. It would, therefore, be appropriate to review some studies involving outcome data generated by another source--the counselor's peers.

Peer ratings. While some discrepancy exists in supervisor and expert ratings of counseling effectiveness, much more is evident in the results of the studies that involve peer ratings as outcome measures.

Stefflre, King, and Leafgren (1962) used peer judgment of effectiveness as a means to identify differences between peers chosen as effective and those rejected as not being effective. The task involved the ranking by each individual in a counselor education class of his peers in terms of whether or not he would seek out the person being ranked in a counseling context. The respondents were required to make their choices such that frequencies on a 9-point continuum represented a normal distribution. Using a multiplicity of available measures, such as personality, interests, and values, comparisons were drawn between the nine counselors most chosen and the nine least chosen. Results showed some agreement on logical preconceptions and some previous research, in that chosen counselors were found to be lower in anxiety and dogmatism levels. In addition, they had higher academic performance and somewhat more appropriate interest scores. It is speculated that the "students may not have 'formed' opinions of each other but 'caught' them from instructors on the basis of minimal cues" (Stefflre, King, & Leafgren, 1962, p. 340), and the conclusion is drawn that the nature of the difference between chosen and rejected

students remains hidden.

An investigation in which a group of counselors served as both judges and subjects was conducted by Schumacher (1967) in an attempt to identify interjudge agreement on the rating of competence. The counselors were required to judge themselves and their peers on two variables previously used in promotion committee evaluations of counselor competence: (a) external judgment, which related to ethical issues and organizational details, and (b) job efficiency, which involved competence in counseling. Results showed very low interjudge reliabilities, with the further result that there was no consistent evidence that ratings of members with whom the rater worked were any better than those for members with whom he had less contact. Again, results that are somewhat inconclusive have been obtained.

In an effort to determine whether there are differences between counselors chosen and rejected on their respective levels of competency, knowledge of counseling theory and techniques, and likability, Jansen, Robb, and Bonk (1972) conducted a study involving 154 graduate students who had completed a counseling practicum. Each student was asked to rank each of his fellow students on each of the three dimensions. Results showed that graduate students in a counseling practicum were essentially unable to differentiate in their rankings of peers on the dimensions of competency, likabil-

ity, and knowledge of counseling theory and techniques.

In a second study using peers, Jansen, Robb, and Bonk (1973) explored the relationship between peer ratings and self-ratings in a sample of prospective counselors. Each subject was asked to rank his peers on the basis of their skill or competence as a counselor. They were also asked to rate themselves and their fellow students on a 12-item 7-option semantic differential scale. Results showed that counselors differentiated in their ratings of peers perceived as high and low competency as counselors in a manner no different from the previously reported study (Jansen, Robb, & Bonk, 1972). However, the present study did identify that self-ratings followed a different schema than peer ratings. When the bipolar items were factor analyzed, two factors emerged. When ratings were compared on these dimensions, comparisons between subjects rated high and low in competence showed significant differences between self and peer ratings. Bishop (1971) found significant correlations between self-ratings and supervisor ratings, so axiomatically one might conclude that peer ratings should correlate with supervisor ratings on the competency dimension.

Engle and Betz (1971) hypothesized a significant difference in the correlations between peer and supervisor ratings and conducted a study involving 30 counselor candidates at the masters level.

The students were asked to rank their fellow students in terms of

who they would turn to for counseling. Supervisor rankings based on counseling effectiveness in the practicum were also obtained. Correlations between peer and supervisor rankings were found to be significant. This finding, then, confirms the axiomatically deduced hypothesis derived from the previous study.

Shapiro (1968a) undertook to study the generality of psychotherapeutic attitudes as judged by self, peers, supervisors, and a standard interviewee, using a 7-option scale measuring empathy, warmth, genuineness, evaluation, potency, and activity. Results showed no significant correlations to exist between the groups. One interesting point was found, however; the standard interviewee was able to differentiate helpful from nonhelpful counselors with 5 of the 6 scales used more accurately than supervisors who had spent more time with the student counselors.

These studies show that consistent results do not appear even when using peer ratings. The reason is perhaps as Jansen, Robb, and Bonk (1973) have indicated--peers respond to factors other than counseling effectiveness when assessing counselor competence. The one bright light here is the finding that the standard interviewee could identify helpful counselors from nonhelpful. This leads us into a discussion of client ratings.

Coached client ratings. A coached client is an individual who poses as a client and is trained to act according to a prescribed

role consistently from counselor to counselor. In this manner, each counselor trainee is presented with important models of client behavior, as well as an opportunity to evaluate his effectiveness by using the coached client's ratings in subsequent training post-mortems (Kelz, 1966; McIlvaine, 1972).

In a study designed to determine if clients coached in objective rating procedures would more closely agree with ratings of counseling effectiveness made by practicum supervisors than would noncoached clients, McIlvaine (1972) had a group of clients and each practicum supervisor complete the CEI. The supervisors completed the rating instrument for each of the six clients seen by his assigned counselor trainee. Among these six clients was the coached client. Results showed a significant difference between coached client ratings and regular client ratings on 3 of the 4 CEI scales, with the counselor comfort subscale not showing discriminative strength. It was also found that coached client ratings were more similar to supervisor ratings than to noncoached client ratings, leading to the conclusion that "the coached client may be a very valuable resource in counselor educator [education] programs, especially in evaluating the interpersonal skills of the beginning counselor trainee" (McIlvaine, 1972, p. 127).

A validation study, designed to show that role playing clients do not require extensive training in order to be effective,

was conducted by Friesen and Dunning (1974). In this study, clients were given a list of over a dozen statements of personal problems. Prior to the assessment interviews, the clients played the role with no coaching by the experimenter. Data from the subsequent role play situation derived from the first 10 minutes of the interview were analyzed for consistency across counselors. It was concluded that professional people, such as actors, need not be recruited to play the client role, and the assumption that the role-playing client must be coached in order to establish consistency is called into question. The minimally coached client may alleviate problems regarding the loss of realism involved with professional consumers or coached clients. It is also noted (Gilberts & Freehill, 1972) that the use of the coached client permits a more precise assessment of differences among counselors, as well as the change within individual counselors resulting from counselor training.

While it seems that coached client methods have distinct value and utility in counselor education programs, it would be unlikely that the quality of counseling provided by practitioners could be assessed in the same way. Primarily because of such restrictions on the use of coached clients and the ease with which regular clients can be trained to become coached clients, it would be most profitable to explore the use of clients as sources of outcome data.

Client ratings. A great deal of controversy surrounds the validity of using client ratings as a means of evaluating therapeutic outcome, much of which stems from the belief that clients, because of their biases and propensity to distort reality--a characteristic probably attributed to them because they sought counseling--are unable to objectively rate aspects of the helping relationship (Horenstein, Houston, & Holmes, 1973; McIlvaine, 1972; Stefflre, King, & Leafgren, 1962). There is, however, a growing body of knowledge which disputes this position.

In his review of the literature dealing with client preferences of counselor characteristics, Rosen (1967) was able to ascertain that clients have both implicit and explicit ideas regarding the characteristics they would like to have displayed by their counselor. Further, it is these preferences which are likely to determine how they will evaluate their counseling experience and its effectiveness. Since client preferences may lead to the formulation of expectancies regarding the counselor's role and/or behavior, it is conceivable that meeting or not meeting those expectancies will have some effect on the client's satisfaction with counseling.

To investigate this premise, Severinsen (1966) had a group of clients rate the degree of lead they expected and subsequently perceived their counselor to take in interviews. Another group rated

the degree of empathy expected and subsequently perceived in their counselors. Client satisfaction scores were obtained using a 5-point rating scale for both groups. A significant relationship was found between client satisfaction scores and the perception-expectation difference for empathy, but not for counselor lead. Satisfaction, then, was found to be more related to the discrepancy between expectation and perception than it was to the counselor's role, which, by the nature of the counselor leads exhibited in the study, was considered to be authoritative.

A study of the differential effect that positive and negative client expectations for counseling would have on the nature of the counseling relationship was conducted by Grosz (1968). Ratings of the relationship were obtained from both counselor and client using the Relationship Inventory (Barrett-Lennard, 1962). Data analysis showed no significant differences in client ratings of the relationship for either expectation condition. Similarly, no differences occurred for the counselor perceptions either, leading the experimenter to conclude that a positive client expectation for counseling need not be a prerequisite for the establishment of a helping relationship.

Lorr (1965), in an attempt to identify some of the principle dimensions along which clients perceive their counselors, had 523 clients complete a 65-item inventory descriptive of therapist be-

haviors. The results were compiled and a matrix of correlations calculated, which was then submitted to a factor analysis technique. The result was a clearly defined 5-factor extraction, indicating client perceptions of counselors as: (a) understanding, (b) accepting, (c) authoritarian, (d) independence-encouraging, and (e) critical-hostile. Subsequent testing indicated that client ratings of overall improvement and therapist judgments of client satisfaction with treatment were positively correlated with each of the factors.

While the above studies are meaningful in the context of this study as they relate to authority and the prison environment with its attendant negativism, it would be prudent to explore client rating ability further, particularly in terms of the client's ability to identify helpful behaviors in counseling.

In a study designed to compare, by means of client ratings, practicing school counselors with a practicum to those without it, Pfeifle (1971) had 167 counselors and 3 clients from each of their respective caseloads complete the CEI. Results showed that there was a significant difference between counselor groups, the counselors with practicum scoring higher. In addition to the above comparison, the author studied the influence of age, number of years teaching experience, number of years counseling experience, and sex in an effort to determine their effect on client ratings of

the same practicum and nonpracticum counselors. These results showed that there was no significant difference between counselor groups on the basis of the added dimensions, but in every case those with practicum were rated significantly higher than those without. This would lead one to conclude that, of the dimensions listed, it is the practicum experience which is an important area of counselor education and its presence or absence is discernible by clients.

A study was conducted by Gabbert, Ivey, and Miller (1967), again using the CEI, to investigate the hypotheses that (a) clients seen by different counselors have varying attitudes toward the counseling experience, and (b) clients will vary in attitude toward a specific counselor by virtue of their sex, diagnostic category, and duration of counseling. The study involved 405 clients and 8 counselors, 5 of whom were graduate students. Results confirmed the major hypothesis, indicating that clients do have differing attitudes towards their counselors and that these attitudes vary among counselors. Thus, some counselors relate better to males while others form a better relationship with female clients, and some counselors were found to relate better to clients who presented personal problems while others established better relationships with clients who presented vocational concerns. Too, the relationship between number of interviews and favorable attitudes was con-

firmed; the more sessions, the more favorable the attitudes expressed. This effect was confirmed upon replication (Ivey, Miller, & Gabbert, 1968). It was also determined in the replication that attitudes toward counseling vary with the counselor-client combination, suggesting that the match between the counselor and client is an important factor in counseling.

Rickabaugh, Heaps, and Finley (1972) hypothesized that, for group counselors found to be more effective in promoting academic recovery of probationary students than less effective group counselors, client ratings along the CEI dimensions--counseling climate, counselor comfort, and client satisfaction--would not differ significantly. By using student pre- and post-counseling grades, two groups of counselors were determined. Those whose students showed the greatest difference in pre-post counseling grades were termed high effective, while counselors with the least grade difference were termed least effective. Client perceptions of the counselors were obtained using the CEI. It was found that no significant difference existed between client perceptions of the high and low effective counselors, neither on counseling climate nor on client satisfaction, whereas clients perceived the high effective counselors to be more comfortable than the low effective. When client ratings were summed to provide a total score, which denotes perceptions of the overall relationship, a significant difference

was found with ratings of the high effective counselors being higher. This study, too, indicates clients can differentiate between counselors identified as effective and ineffective on some objective criteria, such as the pre-post counseling grades of their counselors.

In a previously reported study (Horenstein, Houston, & Holmes, 1973), it was noted that client ratings of progress in therapy showed better agreement with those of independent judges than those of their therapists. Similarly, Bishop (1971) found client ratings of the relationship to be higher than either of those by the counselor and those of the counselor's supervisor in terms of counselor effectiveness. From the studies reported regarding the sources of data on outcome in counseling, it would appear that client perceptions of the relationship are more consistent over a broader range of variables than are any of the other sources of data, either internal or external to the relationship. Further, it is the

Client's experience of his therapist's response [that] is the primary locus of therapeutic influence in their relationship It is what the client himself experiences that affects him directly [Thus,] it would seem that his own report, given under suitable conditions, would be the most direct and reliable evidence we could get of his actual experience. (Barrett-Lennard, 1962, p. 2)

Validity of Rating Scales

Closely related to the question of how reliable the data obtained might be is the larger issue of the validity of the instrumentation used to collect therapeutic outcome data. All methods of data collection involve, to a greater or lesser degree, observations, either directly or indirectly, of behavior or action and some inference based on the observation. Perhaps the most frequently used collection methods are the questionnaire and the interview for which validities are not well known (Walsh, 1968, 1969). This stems from the fact that such data, particularly interview data, are derived from relatively unstructured questions which are somewhat subjective and vary from observer to observer, thereby yielding material that is difficult to quantify. Other forms of data collection, such as objective tests, are very precise and derive their strength from the highly structured questions asked, thereby allowing comparisons across studies to be made. Between these two poles, the subjective and highly structured, lies the domain of the rating scale.

A rating scale has two components: (a) a set of stimulus variables, and (b) a pattern of response options. The most common rating scales present the rater with a set of trait names and a range of numbers, adjectives, or descriptions designed to represent the degree to which the trait in question is possessed by the

person or object being rated (Thorndike & Hagen, 1961).

Three types of rating scales which follow this general pattern--category, numerical, and graphic--can be constructed. The category rating scale presents the observer with several characteristics from which the one best describing the trait observed is selected, while the numerical rating scale, which implies equal scale intervals, provides numbers readily amenable to data analysis procedures. In the graphic rating scale, lines or bars are constructed in which verbal descriptors and an apparent continuum are combined. While scales of this nature generate easily quantifiable data, they are not entirely free of difficulties.

The observer of the behavior being rated is, of course, the major contributor to the data, which may be valid or invalid, depending on several factors. The most important of these factors is the importance played by the kind of inference made by the observer after having viewed the behavior to be rated. This observer-inference problem is the chief source of error in rating scale use and is directly related to the amount of interpretation demanded of the observer. The greater the amount of interpretation required, the greater the validity problem (Kerlinger, 1973).

Several sources of error in the observer-inference problem have been identified (Cronbach, 1960; Kerlinger, 1973; Thorndike & Hagen, 1961). Each author identifies the error sources different-

ly but all seem to present, in their own context, the following:

1. The tendency of raters to give favorable reports.
2. The rater may have difficulty with the ambiguousness or specificity of the trait in question.
3. The rater may have constant biases, such as generosity, or tends to compare the subject to himself.
4. The rater has limited information about the individual.
5. The rater's opinion of the person's merit influences his ratings (a halo effect).

It is fairly easy to reduce some of these sources of error by providing the rater with additional knowledge, but others require special effort. It may be necessary for the person requesting the ratings to establish as high a level of rapport and cooperativeness with the prospective rater as is possible. There should be little coercive effort involved, such that a nonthreatening climate is created in which the rater can honestly believe he has the option of participating or withdrawing. This can be achieved by assuring rater anonymity with respect to the responses given.

In spite of all precautions, one must still make a judgment regarding which source of outcome data to use, since all are subject to uncontrolled variability. Supervisor ratings were found to be inconsistent (Ward, Kagan, & Krathwohl, 1972). Peer ratings have been shown to be as effective as supervisor ratings (Engle &

Betz, 1971), a finding that was not to be replicated (Friesen & Dunning, 1973). Coached client ratings were consistent across the studies reviewed, but the nature of the investigation being undertaken mitigates against their use as a source of information about the counseling provided in a prison setting. Client ratings are similarly less subject to gross fluctuations across counselor dimensions (Gabbert, Ivey, & Miller, 1967; Lorr, 1965; Pfeifle, 1971) and have the further distinction that "while clients are not as sophisticated in noting counselor methods as are supervisors, the client knows better how he has reacted to the counselor" (Grigg, 1961, p. 222). This position is given further support by Shapiro (1968b) who concludes that untrained raters, such as clients, "are able to differentiate high and low levels of psychotherapeutic behavior in a manner which is similar to that of trained raters" (p. 88). These untrained raters have had enough general experience, which may or may not have included psychotherapy, to enable them to differentiate between facilitative and harmful psychotherapeutic behavior. Lichtenstein (1971) provides an ideal concluding statement for this review of the literature and justifies the use of client ratings, in spite of their apparent shortcomings, when he says: "treatment outcome can be meaningfully evaluated even though any one measure is imperfect. If no single measurement class is perfect, neither is any scientifically useless" (p. 197).

CHAPTER III

Statement of the Problem

Results of a pilot study, designed to investigate the relationship between client perceptions of the counseling relationship they had with their counselor and counselor dogmatism, and the more extensive literature review reported here, indicate that client perceptions may be influenced by the interaction of counselor and client dogmatism, in addition to the effects of counselor dogmatism alone. Further, it appeared likely that a relationship might exist between client perceptions and the similarity of client dogmatism scores to those of their counselors. If such were found to be the case, an appropriate match between counselor and client, using dogmatism scale scores, could be made and the effect measured by means of client perceptions of the counseling relationship.

In order to verify these contentions, three hypotheses were advanced:

1. Client perceptions of the counseling relationship are significantly related to counselor dogmatism.
2. Client perceptions of the counseling relationship are significantly related to client/counselor similarity on dogmatism.
3. Client perceptions of the counseling relationship are related to client/counselor similarity in curvilinear fashion.

Throughout this aspect of the study, it was decided to hold

age of client and length of client's incarceration constant by treating them as covariates. The rationale for this is that dogmatism is known to vary with age (Anderson, 1962; Heikkanen, 1975; Smith, Locke, & Fenster, 1970), while prudence dictated the necessity to control any unexpected relationship that might exist between dogmatism and length of sentence as a result of anger and/or frustration associated with the deprivation of freedom.

In the event that all the hypotheses outlined above are supported, statements regarding whether or not counseling took place or even that a counseling relationship was in existence cannot be made. It was thus considered necessary to address this issue, such that information about the counselor's ability to offer therapeutic conditions could be obtained.

Ivey (1971) indicates that trainees are more effective interviewers after microcounseling training because the specific behaviors they learned become integrated into their skill repertoire. A similar position is held by Carkhuff (1969) who suggests that discrimination training initiates a shaping process whereby trainees become more aware of themselves and become more able to make evaluations of self and others.

Although the main study does not provide information about counselor ability, the microcounseling and discrimination training models do. These models can then be used to validate the findings

of the main study by means of a second study designed to be a behavioral test of both the counselors' and clients' abilities to identify helpful counseling skills. Since there is no requirement that prison counselors be trained in counseling, it was considered necessary to include in the study a control group of professionally trained counselors against whose performance the prison counselors would be compared. Four hypotheses were advanced:

1. Counselor ratings indicate a greater ability to discriminate on the basis of counseling climate than clients.
2. Ratings of counseling climate do not differ across institutional settings.
3. Ratings of counseling climate for those segments in which particular counseling skills are portrayed will be higher than for those where the skills are absent.
4. Ratings of counseling climate will not differ across segments where different counseling skills are portrayed.

CHAPTER IV

EXPERIMENT 1

Method

Subjects

Clients. The subject pool constituted the population of a major western Canadian federal penitentiary designated as a maximum security institution housing 512 offenders. Ages of the offender population range from 17 to 58 years, with the average age being 28.6 years. The distribution has a median of 24.4 and a mode of 23.

Sentences, the nature of which run the gamut of crimes against persons (e.g., murder, sex offences, and kidnapping) through crimes against property (e.g., break and enter, theft, and possession of stolen property) to a special category of those completing a previous term as a result of parole revocation or mandatory supervision forfeiture, were all represented in the sample. The sentences range from 3 months 5 days to life, with a mean of 4.8 years, a median of 3.9 years, and a mode of 2 years. Life terms, because of their inherent indeterminacy, are excluded from the above statistics.

Participants in the major study, 107 in number, were selected on a voluntary basis and were given the assurance of retaining

their right to refuse to continue as they wished. Selection of subjects was continued until 10 subjects from the caseloads of each of 11 classification officers were identified. The client had to have been assigned to their counselor for a minimum of 3 months during which a relationship will have been developed. The average age and sentence of these volunteers was 28.4 years and 5½ years, respectively. Only seven volunteers were obtained from the caseload of one classification officer because, upon his departure, the clients on his caseload were reassigned to other classification officers and became ineligible to participate in the study because the 3-month rule could not be applied.

Counselors. The classification officers who participated in the study, 11 in number, one of whom was a female, had all completed bachelor degrees in arts and science, primarily but not restricted to the behavioral sciences. None had a practicum in counseling during their training which, in most cases, included coursework in personality theory. Each had been working in the institution for a minimum of 1 year with their experience ranging from 1½ to 6 years as a prison counselor. Their ages range from 25 to 35 years.

Instruments

Counselor Effectiveness Scale (CES) (See Appendix A). The

semantic differential technique (Osgood, Suci, & Tannenbaum, 1957), considered a reliable and valid method for assessing attitudes and feelings (Kerlinger, 1964), was used by Ivey, Normington, Miller, Morrill, and Haase (1968) to develop a scale for measuring client attitudes toward their counselor. This scale, the CES, is available in two 7-option, 25-item parallel forms. The items were those of a 93-item pool found to discriminate adequately between desirable and undesirable counselor behavior, as well as being the ones on which interrater agreement was highest. Instrument reliability established by the parallel form method was found to be significant, $r = .975$, $p < .001$, $N = 18$, as was interrater reliability, $w = .37$, $p < .001$, $N = 50$. A validity study conducted to test the instrument's ability to discriminate between good and bad models of counselor behavior showed significant results, $t = 8.28$, $p < .001$, $N = 18$ in Form 1; and $t = 10.6$, $p < .001$, $N = 18$ in Form 2. The authors conclude that, although the scale is a reliable and valid instrument, further reliability and validity study is recommended.

Counseling Evaluation Inventory (CEI) (See Appendix B). The CEI was devised by Linden, Stone, and Shertzer (1965) as a brief instrument useful in the measurement of client attitudes toward counseling, thereby providing a means by which client ratings could be used as a criterion for counseling effectiveness. Inspection of the content of items remaining after factor analytic screening iden-

tified three definable factors which the authors labeled: (a) Counseling Climate (X), (b) Counselor Comfort (Y), (c) Client Satisfaction (Z), containing 9, 5, and 7 items respectively, and (d) Total represented by the sum of X, Y, and Z. Empirical scoring weights based on the factor loadings determined the contribution of each response to the factor score of the related item. Using the finished CEI, a test-retest study was conducted which showed reliability levels ($p < .05$) over a 14-day period for 41 students. It was also found that the median coefficient computed among total scores was .72. Discriminative validity using practicum grades was found to be significant ($p < .05$) and the authors concluded a reliable and valid instrument had been developed.

Rokeach Dogmatism Scale (See Appendix C). Attitudes of both clients and counselors were assessed using the Dogmatism Scale, Form E, devised by Rokeach (1960). The purpose of this scale is indicated as being to measure individual differences in openness or closedness of belief systems and to give an indication of general authoritarianism and intolerance.

Construction of Form D of the Dogmatism Scale began with an item pool of 89 items which were tried out and revised by item analysis procedures on four successive occasions, each of which was designed to increase the reliability and to strengthen theoretical formulations. The best 40 items were identified from among

the 66 items of Form D by item analysis and were collected into the short form of the Dogmatism Scale--Form E (Rokeach, 1960). Form E is designed so as to require the respondent to make a judgment of each item statement on a 6-point continuum from strong agreement to strong disagreement, and record his choice in numerical form with appropriate valence.

The scale is then converted to a 7-option semantic differential format by adding 4 to each item response, thus eliminating the necessity to consider valence. The Dogmatism Scale scores are obtained by summing the converted item scores over all items. It is conceivable that scores obtained could range from a low of 40 to a high of 280. In no case can a score of 0 be obtained, thereby eliminating the possibility of neutral response.

Form E has been found to have a corrected reliability of .78 for a sample of English workers (N = 60) and for two samples of Veterans Affairs patients (N = 24, and N = 17) reliabilities of .93 and .84 were obtained, respectively. The method used to establish these reliabilities was by test-retest, with the period between test and retest being at least 1 month. These reliabilities are considered to be quite satisfactory (Rokeach, 1960).

Relationship Questionnaire (RQ) (See Appendix D). The Relationship Questionnaire, devised by Truax and Carkhuff (1967), is a 141-item true-false instrument designed to be used by clients for

the purpose of assessing six aspects of the therapeutic relationship: (a) accurate empathy, (b) warmth, (c) genuineness, (d) overall therapeutic relationship, (e) intensity and intimacy of interpersonal contact, and (f) concreteness. Correlations between RQ measures of the therapeutic conditions by clients and professional ratings of the tape-recorded client-counselor interactions were found to range from .53 to .56 for juvenile delinquents and neurotics, while for hospitalized mental patients the correlations ranged from .10 to .20. The data suggest that the RQ is a valuable instrument for use with clients who are not seriously disturbed. Subscale scores are obtained by totaling the hits for each item that correspond to it.

Procedure

It was decided that data collection should be undertaken when the information obtained would most adequately represent the state of prison counseling services. Of the several incidents which occurred across the federal prison system, two directly involved the counseling staff.

The first of these, a hostage-taking incident in which one of the hostage counselors died, occurred in one of the other maximum security facilities in western Canada. This incident necessitated a considerable delay in data collection to reduce the possibility of the data reflecting a negative evaluation of counseling precipi-

tated by a counselor retaliation against their clients.

In the interim, a second incident, which occurred in the institution from which subjects were drawn, involved the display of client feelings about the effectiveness of counselors and prison counseling in general by means of a boycott of counselors. The primary issue precipitating this boycott was the belief by inmates that counselors were powerless, since their interventions were often contravened by a more senior authority.

Data collection began in mid-summer of 1976 after an 8-month delay to permit stabilization of feelings which resulted from the boycott.

Clients' instructions. Each prison inmate was interviewed by the author and was told that, as a result of the criticism of the nature of counseling services provided at the institution expressed by the inmate population 8 months earlier, a study of the relationship that existed between inmates and their classification officer was being undertaken. They were shown the data collection instruments and were instructed in their use. Each was told that he would be asked to identify himself on the dogmatism scale only, the remaining scales being responded to anonymously. All the data collected would be treated as confidential information and would not become part of any institutional record. They were then asked if they wished to participate in the study. This explanation was

followed with each inmate seen until 10 volunteers from each classification officer's caseload had been identified. To obtain all the subjects, 191 clients were interviewed. Sessions during which the scales were completed were scheduled for the volunteer on the day following the first interview. Volunteers were scheduled in groups or singly, depending on the numbers agreeing to participate. Of the 191 clients interviewed, 60 refused to participate, 19 volunteered but changed their mind prior to or during data collection, and 5 were released or transferred before the data could be collected. The participant to those interviewed ratio was 59%. In addition, data for 10 clients were purged because their data records were incomplete, leaving 97 sets of complete data for analysis.

Counselors' instructions. As a group, the counseling staff was informed that the purpose of the study was to investigate the relationship they had with their inmate clients. The instructions given to the inmates were conveyed to the counselors and they were given an opportunity to view the data collection instruments. They were informed that part of the study was designed to investigate what constituted an appropriate inmate-counselor match, and were asked to complete the Rokeach Dogmatism Scale, Form E (Rokeach, 1960). None of those asked failed to respond.

Similarity. The independent variable--similarity--is a com-

posite derived from the degree to which counselor dogmatism profiles resemble those of their clients. It is represented by the D-statistic which has been used by Cook (1966), Gerler (1958), Mendlesohn (1966), and Mendlesohn and Geller (1967) in their research studies. The similarity index, computed by calculating the square root of the sum of the squared differences between the counselor and client scores on each of the dogmatism scale items ($D = \sqrt{\sum d^2}$), takes into account both the differences in profile shapes and the absolute discrepancy between the paired profiles (Cook, 1966). This index of similarity may thus be considered to be a continuous variable, with greater similarity being represented by the lowest D values.

Research design. The choice of statistical procedures to be used in data analysis, particularly when 11 dependent variables (6 RQ scales, 1 CES scale, and 4 CEI scales), 3 independent variables (counselor dogmatism, client dogmatism, and client/counselor similarity), and 2 covariates (client age, and client sentence) are involved, presents somewhat of a dilemma. It would seem that a multivariate approach would be most appropriate. Historically, however, such techniques, multiple regression analysis (MRA) in particular, have been generally associated with less rigorous and exploratory research, while analysis of variance (Anova), which is a univariate technique if the cell frequencies are equal, is used

primarily "by hard-nosed researchers who conduct laboratory experiments" (Harris, 1975, p. 9). Resolution of the dilemma is not easy since Anova can be viewed as a special case of multivariate analysis, a fact that becomes more clearly evident in higher order Anova with unequal cell size (Harris, 1975).

In clinical practice, one rarely limits oneself to a single predictor of outcome. If such single predictors are tested by a series of statistical procedures, the probability of rejecting the Null hypothesis tends to increase as the number of tests increase. Control of such experimentwise errors by a multivariate technique is highly desirable (Luborsky, Chandler, Auerbach, Cohen, & Bachrach, 1971).

The MRA procedure used in this study responds most appropriately to the issues raised and enables adequate testing of the data with little loss of information.

Although forward selection, backward elimination, and stepwise methods of performing MRA are most commonly used (Draper & Smith, 1966; Kerlinger & Pedhazur, 1973), Cohen and Cohen (1975) provide for the ordering of independent variables according to their "temporally or logically determined causal priority" (p. 99). This was the strategy followed in this study.

The first variables to be included in the analyses were the two covariates--client age and client sentence. Subsequently,

counselor dogmatism was accorded the highest causal priority since it is believed to have considerable influence in the counseling relationship (Cahoon, 1962; Kemp, 1961, 1962; Mezzano, 1969; Steffire, King, & Leafgren, 1962). Client variables are considered important to the relationship (Rogers, 1957) so client dogmatism was relegated to second priority, to be included after counselor dogmatism in the regression model. Although client/counselor similarity is considered to be a factor in the counseling relationship (Carson & Llewellyn, 1966; Cronbach, 1955; Gerler, 1958; Lichtenstein, 1966; Mendelsohn & Geller, 1963), neither its importance nor its relationship to the counseling interaction has been clearly established. Thus, it was accorded third priority, to be added to the model last.

The effect adding the independent variables to the regression model, after the variability due to the covariates had been extracted, had upon each of the 11 dependent variables was tested by the F-ratio and was reported in Anova tables (Draper & Smith, 1966). The MRA was performed on an IBM facility using a program written in APL (Woods, Note 1).

Results

In the data analysis procedure using MRA, client age and client sentence were treated as covariates with counselor dogmatism, client dogmatism, and client/counselor similarity treated as inde-

pendent variables. A 5% level of significance was used throughout to establish whether the independent variables influenced client ratings of outcome. The results of the analyses performed are summarized in Tables 1 through 11, one table corresponding to each of the dependent variables in the study.

Examination of the F-value reported in each table for the effect of regression, which represents the multiple correlation coefficient in each analysis, indicates that none attains a level sufficient to be considered significant. This finding indicates that the independent variables are not linearly related.

Hypothesis 1

Examination of Tables 1 through 11 shows that counselor dogmatism failed to influence client ratings. The hypothesis that client perceptions of the relationship are significantly related to counselor dogmatism must, therefore, be rejected.

Hypothesis 2

Tables 1 through 11 show that after variability due to the covariates--counselor dogmatism and client dogmatism--have been accounted for, the addition of client/counselor similarity to the model fails to improve it significantly, thereby necessitating the rejection of the hypothesis that client/counselor similarity on dogmatism is significantly related to client perceptions of the

Table 1
 Summary of Analysis of Variance
 for the Dependent Variable Empathy

Source	<u>df</u>	<u>SS</u>	<u>MS</u>	<u>F</u>	<u>p</u>
Total	96	12916.56	134.55	-	-
Covariates	2	265.30	132.65	-	-
Total (Corrected)	94	12651.26	134.59	-	-
Regression					
$b_{23456} | b_{178}$	5	680.47	136.10	1.012	NS
Regression					
$b_2 | b_{178}$	1	20.30	20.30	.151	NS
$b_3 | b_{1278}$	1	57.34	57.34	.426	NS
$b_4 | b_{12378}$ (Linear)	1	231.59	231.59	1.722	NS
$b_5 | b_{123478}$ (Quadratic)	1	5.41	5.41	.040	NS
$b_6 | b_{1234578}$ (Cubic)	1	365.83	365.83	2.720	NS
Residual					
$b_{12345678}$	89	11970.79	134.50	-	-

Note. b_1 = Dummy Variable; b_2 = Counselor Dogmatism; b_3 = Client Dogmatism; b_4 = Client/Counselor Similarity (Linear); b_5 = Client/Counselor Similarity (Quadratic); b_6 = Client/Counselor Similarity (Cubic); b_7 = Client Age; b_8 = Client Sentence.

Table 2
 Summary of Analysis of Variance
 for the Dependent Variable Warmth

Source	<u>df</u>	<u>SS</u>	<u>MS</u>	<u>F</u>	<u>p</u>
Total	96	33185.63	345.68	-	-
Covariates	2	250.16	125.08	-	-
Total (Corrected)	94	32935.47	350.38	-	-
Regression					
$b_{23456} | b_{178}$	5	1948.59	389.72	1.119	NS
Regression					
$b_2 | b_{178}$	1	271.60	271.60	.780	NS
$b_3 | b_{1278}$	1	144.28	144.28	.414	NS
$b_4 | b_{12378}$ (Linear)	1	507.56	507.56	1.458	NS
$b_5 | b_{123478}$ (Quadratic)	1	29.02	29.02	.083	NS
$b_6 | b_{1234578}$ (Cubic)	1	996.13	996.13	2.861	NS
Residual					
$b_{12345678}$	89	30986.88	348.17	-	-

Note. b_1 = Dummy Variable; b_2 = Counselor Dogmatism; b_3 = Client Dogmatism; b_4 = Client/Counselor Similarity (Linear); b_5 = Client/Counselor Similarity (Quadratic); b_6 = Client/Counselor Similarity (Cubic); b_7 = Client Age; b_8 = Client Sentence.

Table 3
 Summary of Analysis of Variance
 for the Dependent Variable Genuineness

Source	<u>df</u>	<u>SS</u>	<u>MS</u>	<u>F</u>	<u>p</u>
Total	96	16643.03	173.36	-	-
Covariates	2	103.36	51.68	-	-
Total (Corrected)	94	16539.67	175.95	-	-
Regression					
$b_{23456} | b_{178}$	5	836.83	167.37	.948	NS
Regression					
$b_2 | b_{178}$	1	103.60	103.60	.587	NS
$b_3 | b_{1278}$	1	32.09	32.09	.182	NS
$b_4 | b_{12378}$ (Linear)	1	195.55	195.55	1.108	NS
$b_5 | b_{123478}$ (Quadratic)	1	24.40	24.40	.138	NS
$b_6 | b_{1234578}$ (Cubic)	1	481.19	481.19	2.727	NS
Residual					
$b_{12345678}$	89	15702.84	176.44	-	-

Note. b_1 = Dummy Variable; b_2 = Counselor Dogmatism; b_3 = Client Dogmatism; b_4 = Client/Counselor Similarity (Linear); b_5 = Client/Counselor Similarity (Quadratic); b_6 = Client/Counselor Similarity (Cubic); b_7 = Client Age; b_8 = Client Sentence.

Table 4
 Summary of Analysis of Variance for the
 Dependent Variable Overall Therapeutic Relationship

Source	df	SS	MS	F	p
Total	96	98168.33	1022.59	-	-
Covariates	2	986.34	493.17	-	-
Total (Corrected)	94	97181.99	1033.85	-	-
Regression					
$b_{23456} | b_{178}$	5	4701.54	940.31	.905	NS
Regression					
$b_2 | b_{178}$	1	382.15	382.15	.368	NS
$b_3 | b_{1278}$	1	181.06	181.06	.174	NS
$b_4 | b_{12378}$ (Linear)	1	1799.90	1799.90	1.732	NS
$b_5 | b_{123478}$ (Quadratic)	1	145.92	145.92	.140	NS
$b_6 | b_{1234578}$ (Cubic)	1	2192.51	2192.51	2.110	NS
Residual					
$b_{12345678}$	89	92480.45	1039.11	-	-

Note. b_1 = Dummy Variable; b_2 = Counselor Dogmatism; b_3 = Client Dogmatism; b_4 = Client/Counselor Similarity (Linear); b_5 = Client/Counselor Similarity (Quadratic); b_6 = Client/Counselor Similarity (Cubic); b_7 = Client Age; b_8 = Client Sentence.

Table 5

 Summary of Analysis of Variance for the Dependent
 Variable Intensity and Intimacy of Interpersonal Contact

Source	<u>df</u>	<u>SS</u>	<u>MS</u>	<u>F</u>	<u>p</u>
Total	96	21845.63	227.55	-	-
Covariates	2	179.79	89.89	-	-
Total (Corrected)	94	21665.84	230.49	-	-
Regression					
$b_{23456} | b_{178}$	5	824.75	164.95	.704	NS
Regression					
$b_2 | b_{178}$	1	48.00	48.00	.205	NS
$b_3 | b_{1278}$	1	21.77	21.77	.093	NS
$b_4 | b_{12378}$ (Linear)	1	334.46	334.46	1.428	NS
$b_5 | b_{123478}$ (Quadratic)	1	13.97	13.97	.060	NS
$b_6 | b_{1234578}$ (Cubic)	1	406.55	406.55	1.736	NS
Residual					
$b_{12345678}$	89	20841.09	234.17	-	-

Note. b_1 = Dummy Variable; b_2 = Counselor Dogmatism; b_3 = Client Dogmatism; b_4 = Client/Counselor Similarity (Linear); b_5 = Client/Counselor Similarity (Quadratic); b_6 = Client/Counselor Similarity (Cubic); b_7 = Client Age; b_8 = Client Sentence.

Table 6
 Summary of Analysis of Variance
 for the Dependent Variable Concreteness

Source	<u>df</u>	<u>SS</u>	<u>MS</u>	<u>F</u>	<u>p</u>
Total	96	9676.04	100.79	-	-
Covariates	2	210.65	105.33	-	-
Total (Corrected)	94	9465.39	100.69	-	-
Regression					
$b_{23456} | b_{178}$	5	395.06	79.01	.775	NS
Regression					
$b_2 | b_{178}$	1	6.14	6.14	.060	NS
$b_3 | b_{1278}$	1	19.68	19.68	.193	NS
$b_4 | b_{12378}$ (Linear)	1	226.15	226.15	2.219	NS
$b_5 | b_{123478}$ (Quadratic)	1	26.68	26.68	.262	NS
$b_6 | b_{1234578}$ (Cubic)	1	116.41	116.41	1.142	NS
Residual					
$b_{12345678}$	89	9070.33	101.91	-	-

Note. b_1 = Dummy Variable; b_2 = Counselor Dogmatism; b_3 = Client Dogmatism; b_4 = Client/Counselor Similarity (Linear); b_5 = Client/Counselor Similarity (Quadratic); b_6 = Client/Counselor Similarity (Cubic); b_7 = Client Age; b_8 = Client Sentence.

Table 7
 Summary of Analysis of Variance for the
 Dependent Variable Counselor Effectiveness Scale

Source	<u>df</u>	<u>SS</u>	<u>MS</u>	<u>F</u>	<u>p</u>
Total	96	124144.68	1293.17	-	-
Covariates	2	296.06	148.03	-	-
Total (Corrected)	94	123848.62	1317.54	-	-
Regression					
$b_{23456} | b_{178}$	5	4901.24	980.25	.733	NS
Regression					
$b_2 | b_{178}$	1	2572.55	2572.55	1.925	NS
$b_3 | b_{1278}$	1	1698.83	1698.83	1.271	NS
$b_4 | b_{12378}$ (Linear)	1	2.79	2.79	.002	NS
$b_5 | b_{123478}$ (Quadratic)	1	557.84	557.84	.417	NS
$b_6 | b_{1234578}$ (Cubic)	1	69.23	69.23	.052	NS
Residual					
$b_{12345678}$	89	118947.38	1336.49	-	-

Note. b_1 = Dummy Variable; b_2 = Counselor Dogmatism; b_3 = Client Dogmatism; b_4 = Client/Counselor Similarity (Linear); b_5 = Client/Counselor Similarity (Quadratic); b_6 = Client/Counselor Similarity (Cubic); b_7 = Client Age; b_8 = Client Sentence.

Table 8
 Summary of Analysis of Variance for
 the Dependent Variable Counseling Climate

Source	<u>df</u>	<u>SS</u>	<u>MS</u>	<u>F</u>	<u>p</u>
Total	96	1223.67	12.75	-	-
Covariates	2	20.18	10.09	-	-
Total (Corrected)	94	1203.49	12.80	-	-
Regression					
$b_{23456}|b_{178}$	5	30.90	6.18	.469	NS
Regression					
$b_2|b_{178}$	1	1.34	1.34	.102	NS
$b_3|b_{1278}$	1	.35	.35	.027	NS
$b_4|b_{12378}$ (Linear)	1	4.34	4.34	.329	NS
$b_5|b_{123478}$ (Quadratic)	1	3.90	3.90	.296	NS
$b_6|b_{1234578}$ (Cubic)	1	20.97	20.97	1.591	NS
Residual					
$b_{12345678}$	89	1172.59	13.18	-	-

Note. b_1 = Dummy Variable; b_2 = Counselor Dogmatism; b_3 = Client Dogmatism; b_4 = Client/Counselor Similarity (Linear); b_5 = Client/Counselor Similarity (Quadratic); b_6 = Client/Counselor Similarity (Cubic); b_7 = Client Age; b_8 = Client Sentence.

Table 9
 Summary of Analysis of Variance for
 the Dependent Variable Counselor Comfort

Source	df	SS	MS	F	p
Total	96	1228.04	12.79	-	-
Covariates	2	113.24	56.62	-	-
Total (Corrected)	94	1114.80	11.86	-	-
Regression					
$b_{23456} | b_{178}$	5	40.09	8.02	.664	NS
Regression					
$b_2 | b_{178}$	1	14.47	14.47	1.199	NS
$b_3 | b_{1278}$	1	13.22	13.22	1.095	NS
$b_4 | b_{12378}$ (Linear)	1	6.43	6.43	.533	NS
$b_5 | b_{123478}$ (Quadratic)	1	5.22	5.22	.432	NS
$b_6 | b_{1234578}$ (Cubic)	1	.75	.75	.062	NS
Residual					
$b_{12345678}$	89	1074.71	12.07	-	-

Note. b_1 = Dummy Variable; b_2 = Counselor Dogmatism; b_3 = Client Dogmatism; b_4 = Client/Counselor Similarity (Linear); b_5 = Client/Counselor Similarity (Quadratic); b_6 = Client/Counselor Similarity (Cubic); b_7 = Client Age; b_8 = Client Sentence.

Table 10
 Summary of Analysis of Variance for
 the Dependent Variable Client Satisfaction

Source	<u>df</u>	<u>SS</u>	<u>MS</u>	<u>F</u>	<u>p</u>
Total	96	676.72	7.05	-	-
Covariates	2	27.96	13.98	-	-
Total (Corrected)	94	648.76	6.90	-	-
Regression					
$b_{23456} | b_{178}$	5	50.40	10.08	1.500	NS
Regression					
$b_2 | b_{178}$	1	9.78	9.78	1.455	NS
$b_3 | b_{1278}$	1	32.67	32.67	4.862	.05
$b_4 | b_{12378}$ (Linear)	1	.63	.63	.094	NS
$b_5 | b_{123478}$ (Quadratic)	1	1.19	1.19	.177	NS
$b_6 | b_{1234578}$ (Cubic)	1	6.13	6.13	.912	NS
Residual					
$b_{12345678}$	89	598.36	6.72	-	-

Note. b_1 = Dummy Variable; b_2 = Counselor Dogmatism; b_3 = Client Dogmatism; b_4 = Client/Counselor Similarity (Linear); b_5 = Client/Counselor Similarity (Quadratic); b_6 = Client/Counselor Similarity (Cubic); b_7 = Client Age; b_8 = Client Sentence.

Table 11
 Summary of Analysis of Variance for the
 Dependent Variable Total (Counseling Effectiveness)

Source	<u>df</u>	<u>SS</u>	<u>MS</u>	<u>F</u>	<u>p</u>
Total	96	6154.66	64.11	-	-
Covariates	2	207.00	103.50	-	-
Total (Corrected)	94	5947.66	63.27	-	-
Regression					
$b_{23456}|b_{178}$	5	255.86	51.17	.800	NS
Regression					
$b_2|b_{178}$	1	65.44	65.44	1.023	NS
$b_3|b_{1278}$	1	98.88	98.88	1.546	NS
$b_4|b_{12378}$ (Linear)	1	.12	.12	.002	NS
$b_5|b_{123478}$ (Quadratic)	1	28.63	28.63	.448	NS
$b_6|b_{1234578}$ (Cubic)	1	62.79	62.79	.982	NS
Residual					
$b_{12345678}$	89	5691.80	63.95	-	-

Note. b_1 = Dummy Variable; b_2 = Counselor Dogmatism; b_3 = Client Dogmatism; b_4 = Client/Counselor Similarity (Linear); b_5 = Client/Counselor Similarity (Quadratic); b_6 = Client/Counselor Similarity (Cubic); b_7 = Client Age; b_8 = Client Sentence.

counseling relationship.

Hypothesis 3

It was hypothesized that client perceptions are related to client/counselor similarity in curvilinear fashion. However, since normal MRA procedures do not address this hypothesis directly, a modified version of MRA, such that it incorporated the opportunity to test for linear, quadratic, and cubic effects as related to client/counselor similarity, was necessary. It can be seen from Tables 1 through 11 that no significant effect is to be derived from adding similarity (linear) to the regression model. It can also be seen that sequentially adding similarity (quadratic) and similarity (cubic) to the model do not improve it sufficiently to attain the prescribed level of significance after the effect of similarity (linear) has been included. In this context, the hypothesis must be rejected and the alternate hypothesis that there is no relationship between client perceptions and client/counselor similarity accepted.

Further study of Tables 1 through 11 reveals that only where Client Satisfaction is the dependent variable does the addition of client dogmatism improve the regression model, $F(1, 93) = 4.862$, $p < .05$. This effect is reported in Table 10.

Conclusions

Failure to find a significant multiple correlation in any of the analyses performed indicates that the independent variables in this study are not linearly related to the dependent variables used to assess the counseling relationship. This result is rather surprising, since client/counselor similarity is a computed composite index relating client dogmatism to counselor dogmatism. It would, therefore, appear that the predictor variables are independent of one another and, thus, may even function independently in the counseling relationship. Curiously, this lack of interaction, with specific reference to counselor and client dogmatism, is exactly the phenomenon reported by Tosi (1970).

Neither of these results should have occurred if what Rogers (1957) reports (i.e., that the client perceives to a minimal degree the acceptance and empathy the counselor experiences for him) is correct, for this implies that an interaction on an attitudinal plane must exist if counseling is to take place. It would be too easy to attribute this result to an artifact of the institutional setting in which the data were collected had Tosi (1970) not found similar results. This is one area that warrants considerable additional investigation.

Finding that counselor dogmatism is unrelated to client perceptions of the counseling relationship seems to be contrary to the

existing body of knowledge regarding the relationship of dogmatism to counseling. Closer examination of the research evidence reveals that effectiveness in counseling, as it relates to dogmatism, is determined by the judgments by peers (Stefflre, King, & Leafgren, 1962), supervisors (Brams, 1957; Jackson & Thompson, 1971; Passons & Olsen, 1969), and experts (Russo, Kelz, & Hudson, 1964; Sprint-hall, Whiteley, & Mosher, 1966), and never by clients, as was done in this study. It would appear, then, that counselor dogmatism is not as important a variable as we are lead to believe, for clients appear to negate its importance as a counselor attribute in their counseling relationship ratings. Their ratings of satisfaction accord it considerable importance as an attribute manifested by themselves, however. Thus, the more dogmatic the client, the more likely he is to perceive satisfaction in the relationship.

Of considerable importance in the context of this study is the lack of statistical support for the client/counselor similarity hypothesis, based on client and counselor dogmatism scores, for it fails to provide any rational basis on which substantiation of the research of Bare (1967), Boy and Pine (1976), and Mendelsohn and Geller (1963, 1967) can be made.

Rejecting the first hypothesis negates the claim by Allen (1967), Kemp (1961, 1962), Mezzano (1969), Stefflre, King, and Leafgren (1962), and Walton and Sweeney (1969) that counselor dog-

matism is the single most important variable to be included in judging counseling relationships. Rejecting the second hypothesis negates, as well, claims that client/counselor similarity is an important variable, as suggested by Boy and Pine (1976), Hollingshead and Redlich (1958), Holzman (1961), Pettit, Pettit, and Welkowitz (1974), Preckner (1952), and Snyder (1961), particularly where client ratings are used.

The literature relating client/counselor similarity to therapeutic outcome presents a rather confusing picture. Some researchers have found the relationship to be linear (Heine & Trosman, 1960; Mendelsohn & Geller, 1963; Tuma & Gustad, 1957), curvilinear (Carson & Heine, 1962; Cook, 1966; Gerler, 1958; Lichtenstein, 1966; Pettit, Pettit, & Welkowitz, 1974), nonexistent (Carson & Llewellyn, 1966), or negative (Lesser, 1961; Snyder, 1961; Wogan, 1970).

The findings of this study, which reveal a nonsignificant linear relationship between client/counselor similarity and client ratings as well as a nonsignificant curvilinear relationship, either quadratic or cubic, do not shed much light on the situation, for they fall into the domain of studies characterized by the term nonexistent. This then may be considered to be a fertile ground for more rigorous research.

While the information gleaned from the major study is viable

and useful in the context of the counseling relationship, a second study to identify if the counselors in a prison setting, who have little or no counselor training, can recognize conditions under which therapy can take place, is now necessary. If it can be shown that they are able to make appropriate discriminations, the possibility of therapeutic relationships being created whenever possible is enhanced.

CHAPTER V

EXPERIMENT 2

Method

Subjects

Clients. Subjects were drawn from the inmate populations of three western Canadian federal penitentiaries considered representative of maximum, medium, and minimum security institutions, and from the patient population of a western Canadian metropolitan community medical clinic. Participants (17 from a maximum security institution, 20 from a medium, 4 from a minimum security institution, and 7 from a medical clinic) were those who responded to an internal appeal for volunteers to participate in a study of the perceptions of counseling held by clients and counselors.

Counselors. The classification officers employed in the maximum and medium security institutions had completed, as a minimum qualification, a bachelor of arts degree, not necessarily in the area of counseling. Although counselors in the minimum security institution are required to have as a minimum qualification a high school leaving certificate, all had completed bachelor's degrees, not necessarily in counseling. Counselors in the medical clinic were professional medical social workers who had completed coursework in counseling and/or taken microcounseling training (Ivey,

1971) or discrimination training in counseling skills (Carkhuff, 1969). Participants (11 counselors working in the maximum, 5 from the medium, and 6 from the minimum security institutions, as well as 5 employed in the community clinic) were those of the establishment staff available at the time data were to be collected.

Instruments

Scale of counseling climate (See Appendix E). Authors of the CEI (Linden, Stone, & Shertzer, 1965) indicate that "despite their brevity, all CEI factor scales and the CEI total score exhibited adequate reliability and at least limited discriminative validity for practicum grades" (p. 275). It was decided, therefore, that the short 9-item, 5-option, Likert-type, Factor X scale would be used to obtain client and counselor ratings of counseling climate for a series of common stimulus elements.

Counseling stimuli. Microcounseling skills (Ivey, 1971)--empathic understanding, paraphrasing, acceptance, and clarification--were demonstrated and recorded on video tape as part of a counselor development program (Young, 1974). Each skill was demonstrated by a different counselor and a different client. A segment depicting the presence of the skill was paired with a segment portraying the absence of the skill, both segments being demonstrated by the same counselor and client. The order of these segments was

varied over the four skills.

Because the quality of the video recording was poor, the skill of clarification had to be deleted. Skill titles and segment identification were also removed. The remaining six segments were shortened to make all segments equal in length at 3 to 4 minutes. The material was rerecorded on a Sony Video Cassette for viewing on a 12-inch Sony monitor using a Sony Model 1800 video recorder player.

Procedure

Video-taped counseling segments (Young, 1974) were shown to the subjects in small group sessions. After each segment was viewed, the subjects were asked to record their respective perceptions of the counselor-client relationship depicted by completing the CEI scale of counseling climate. Responses were made on a 5-point continuum that ranged from always to never. This procedure was followed for each of the six segments in the study.

Scoring of the response sheets was done according to the schema outlined by Linden, Stone, and Shertzer (1965), which uses factor analytically derived weights rather than a Likert weighting system. Since this study concerns itself primarily with the strength of the attitudes held rather than the degree of favorability or unfavorability of the attitude (Gabbert, 1965; Gabbert, Ivey, & Miller, 1967), choice of the factor analytically based

scoring system was considered more appropriate.

Independent variables used in this study were: (a) institution, represented by maximum, medium, and minimum security classification prisons and a community clinic, all of which provide counseling services to their respective clientele, (b) respondent, represented by subject type--counselors and clients, (c) stimulus valence, which refers to the positive counseling segments wherein counseling skill was exemplified and negative where it was absent, and (d) stimulus, which refers to the video-taped segments represented by the counseling skills--empathic understanding, paraphrasing, and acceptance.

The dependent variable--ratings--which represent subjects' perceptions, were subjected to an analysis of variance (Anova) procedure for unequal cell sizes, using the computer program BMDP 2V (Dixon, 1975).

Results

In the Anova procedure used, valence, representing the existence of counseling skill or its absence, designated positive and negative respectively, and stimulus, represented by the counseling skills--empathic understanding, paraphrasing, and acceptance--were the within-subjects variables. The between-subjects variables were comprised of: (a) institution, with its three prisons of differing security classification and a fourth, which is not an institution

per se but a counseling setting nonetheless, (b) subject type, represented by counselor and client, and (c) stimulus, which refers to the paired video segments representing the counseling skills--empathic understanding, paraphrasing, and acceptance--which are designated as stimuli A, B, and C, respectively.

Since this portion of the study was a validation of the results obtained in the main study, it was decided that, while a 5% confidence level would be used, variables whose probability values approach significance would also be referred to, to highlight particular trends.

Hypothesis 1

Examination of Table 12, which presents the summary of the data analysis, reveals that the source of variance--subject type--failed to attain the level required for statistical significance. The hypothesis that counselor ratings would indicate a greater ability to discriminate on the basis of counseling climate than clients must, therefore, be rejected and the alternate hypothesis, that there is no difference in the discriminative ability of either the counselors or the clients, accepted. However, looking at Figure 8, which represents the subject by valence interaction, we see an interesting phenomenon. Although not statistically significant, $F(1, 70) = .039$, $p < .843$, it shows that clients generally perceived the counseling climate more favorably than counselors, re-

Table 12
Summary of Analysis of Variance

Source	<u>df</u>	<u>SS</u>	<u>MS</u>	<u>F</u>	<u>p</u>
Between Subjects					
Institution (a)	3	65.958	21.986	1.210	.312
Subject Type (Co/C1) (b)	1	24.155	24.155	1.330	.253
a x b	3	124.602	41.534	2.287	.086
Error 1	70	1271.475	18.164	-	-
Total Between	77	1486.190			
Within Subjects					
Valence (+/-) (c)	1	440.211	440.211	33.890	.000
c x a	3	49.741	16.580	1.276	.289
c x b	1	.516	.516	.039	.843
c x a x b	3	37.267	12.422	.956	.418
Error 2	70	909.251	12.989	-	-
Stimulus (A/B/C) (d)	2	59.353	29.676	2.817	.063
d x a	6	61.295	10.216	.969	.448
d x b	2	35.844	17.922	1.701	.186
d x a x b	6	19.152	3.192	.303	.934
Error 3	140	1474.758	10.534	-	-
c x d	2	24.834	12.417	1.174	.312
c x d x a	6	20.555	3.425	.324	.924
c x d x b	2	15.045	7.522	.711	.493
c x d x a x b	6	31.475	5.246	.496	.810
Error 4	140	1480.364	10.574	-	-
Total Within	390	4659.661			
Total	467	6145.851			

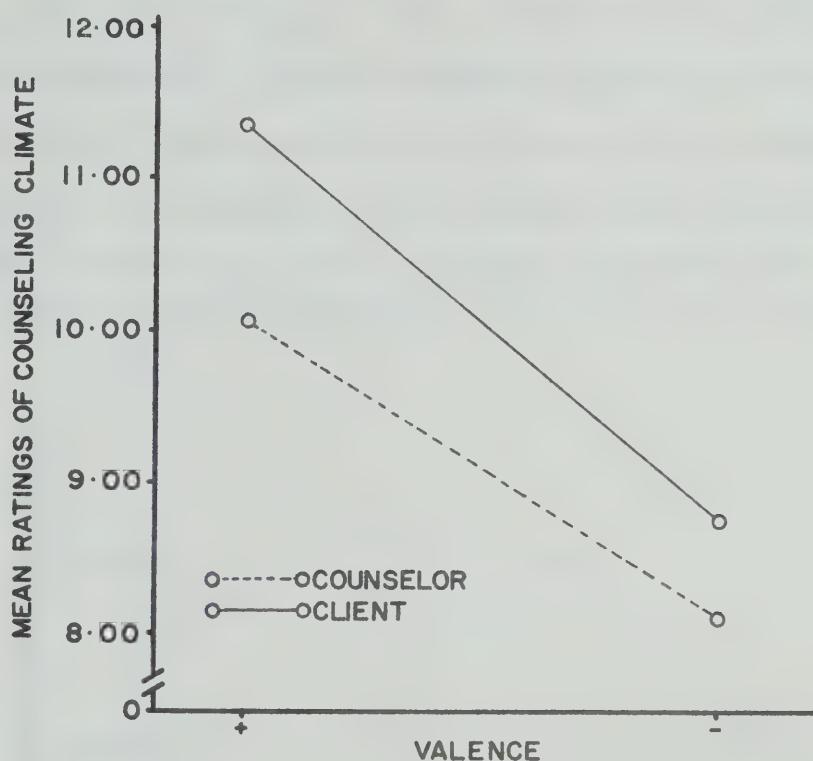


Figure 8. Mean ratings of counseling climate as a function of the interaction of subject type and valence.

gardless of valence. It is even more revealing that the trend appears to be towards a greater ability by the clients to recognize differences in counseling climate as it relates to counseling skill than the counselors, who are supposed to manifest that skill.

Hypothesis 2

The hypothesis that ratings of counseling climate by counselors and clients do not differ across institutional settings is sup-

ported, $F(3, 70) = 1.210$, $p < .312$. Figure 9 presents this relationship graphically. It can be seen that the mean ratings for the clinic are lower than those for the three prisons, necessitating a further investigation of this anomaly, since clinic counselors are better trained than prison counselors involved in this study.

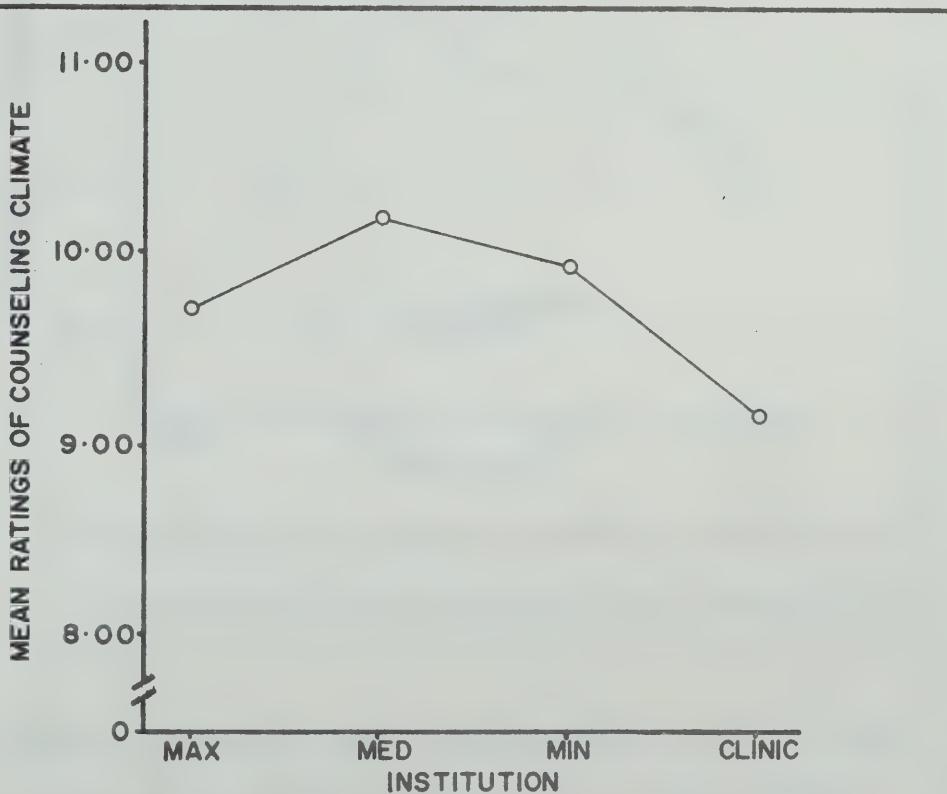


Figure 9. Mean ratings of counseling climate as a function of institutional setting for clients and counselors.

Figure 10 presents graphically the relationship represented by the subject by institution interaction. Although the interaction was not found to be significant, $F(3, 70) = 2.287$, $p < .086$,

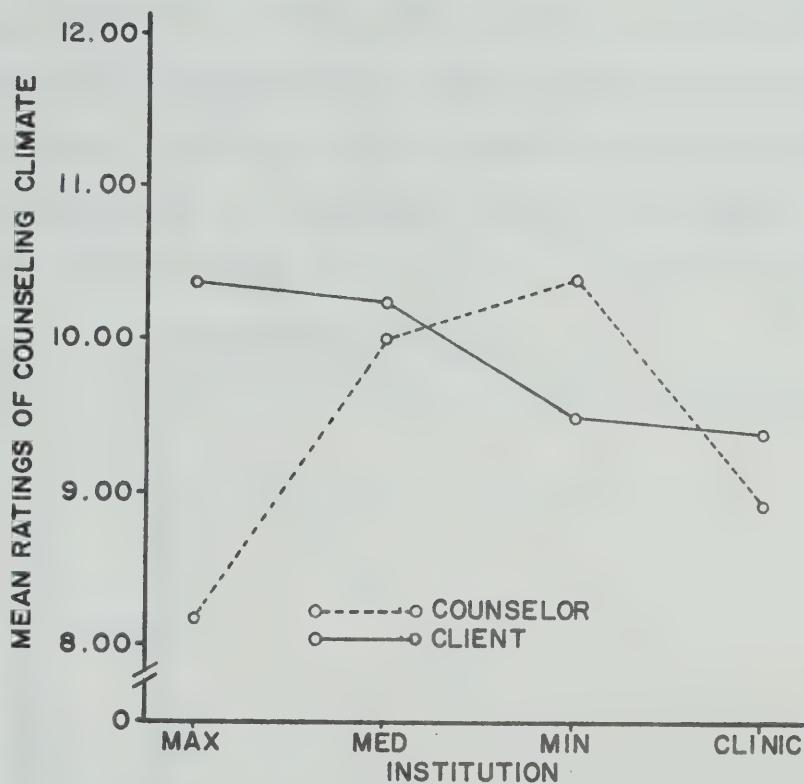


Figure 10. Mean ratings of counseling climate as a function of institutional setting and subject type interaction.

the relationships presented are of interest since, in 3 of 4 counseling settings, client ratings of counseling climate are again more favorable than counselor ratings.

Hypothesis 3

The only main effect to attain the level required for statistical significance was valence, $F(1, 70) = 33.890$, $p < .0001$. Ob-

taining a significant valence effect clearly necessitates the acceptance of the hypothesis that ratings of counseling climate for those segments in which particular counseling skills are portrayed will be higher than for those where the skills are absent. Examination of Figure 11 shows that not only is the main effect significant, it is in the direction predicted.

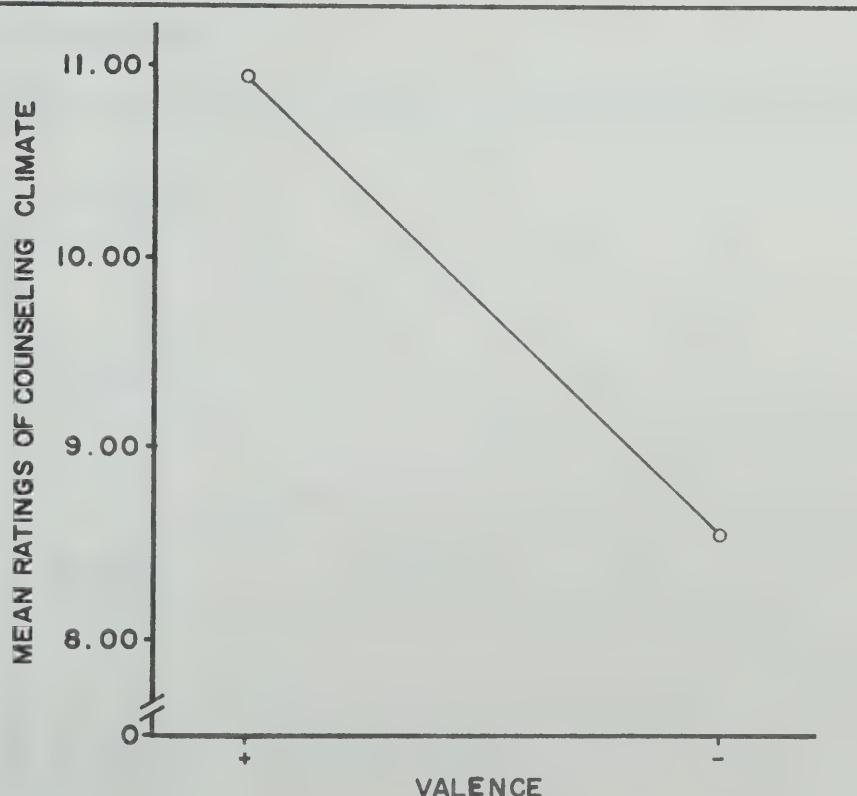


Figure 11. Mean ratings of counseling climate as a function of valence for both clients and counselors.

Hypothesis 4

The hypothesis that ratings of counseling climate will not differ across segments where different counseling skills are portrayed is supported, since significance was not attained, $F(2, 140) = 2.817$, $p < .063$. Graphic representation (Figure 12) shows that counseling climate is rated most favorably when the skill of acceptance is portrayed.

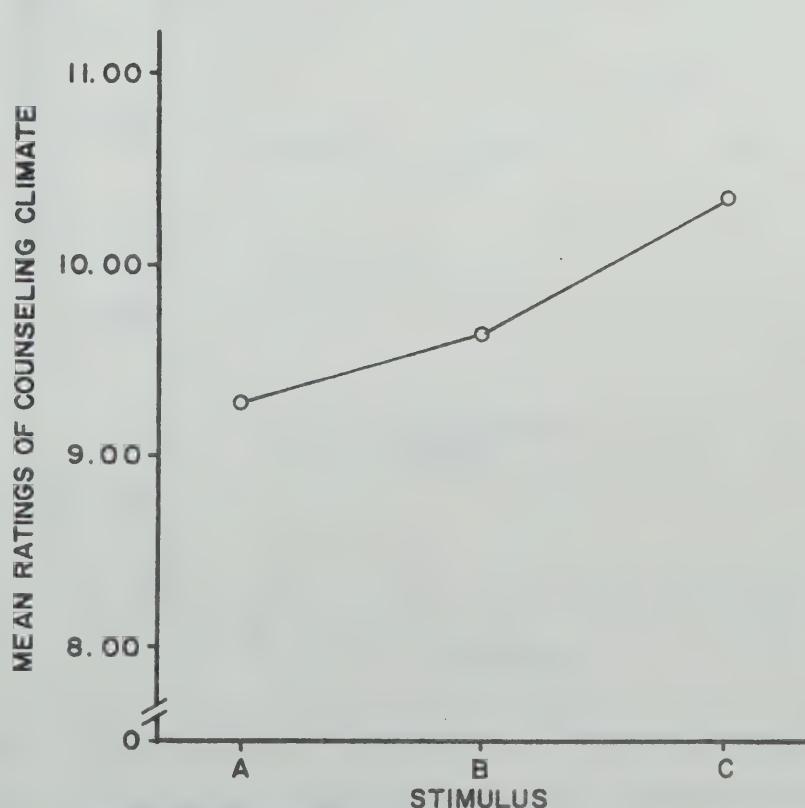


Figure 12. Mean ratings of counseling climate as a function of counseling stimulus for clients and counselors.

Further study of this main effect in terms of its interaction with subject type, as depicted in Figure 13, shows that once again client ratings of counseling climate are more favorable than those of the counselors. The interaction effect was not found to be significant, $F(2, 140) = 1.701$, $p < .186$.

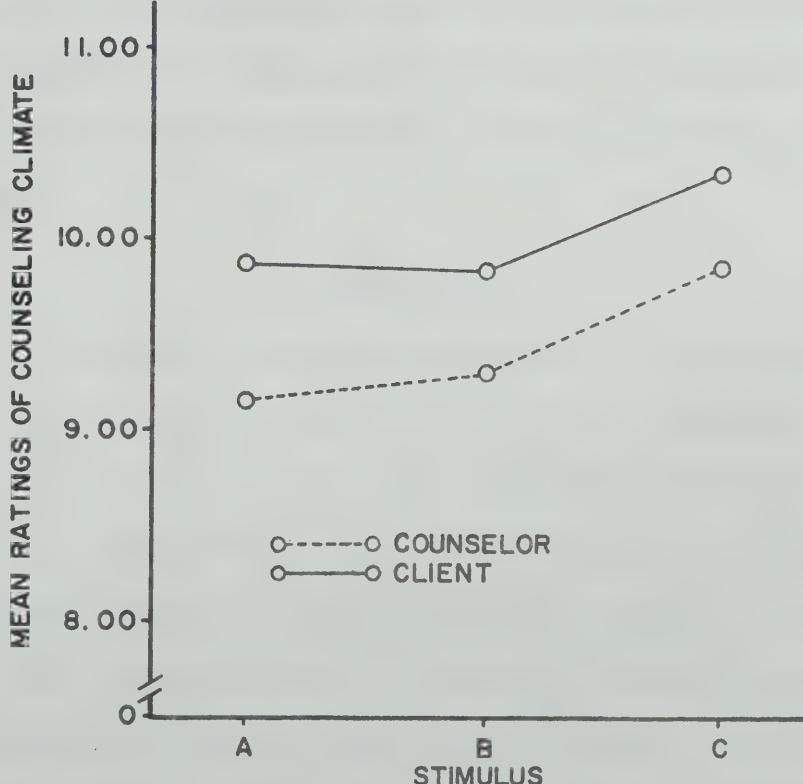


Figure 13. Mean ratings of counseling climate as a function of counseling stimulus and subject type interaction.

In summary, the data obtained enables one to (a) reject Hypothesis 1, that counselor ratings indicate a greater discriminative ability with respect to counseling climate than do client ratings; (b) accept Hypothesis 2, that ratings of counseling climate do not differ across institutional settings; (c) accept Hypothesis 3, that ratings of counseling climate are more favorable when counseling skill is portrayed than when it is not; and, finally, (d) accept Hypothesis 4, indicating that ratings of counseling climate do not differ across segments where different counseling skills are portrayed.

Conclusions

It is a generally accepted premise that it is the counselor's intention to establish a climate in which "the initiation of a process" (Rogers, 1957, p. 140) called counseling can take place. It would then be appropriate to assume that, since the counselor is more actively involved in establishing good counseling climate than is the client, any perceptions of counseling climate by counselors will be more discriminating than those of clients. Finding no significant differences between client and counselor perceptions of counseling climate, then, contradicts the initial premise. The situation becomes even more unusual when it is noted that client ratings are more favorable than counselor ratings, regardless of the segment valence.

One explanation for this phenomenon can be found in the words of Grigg (1961), who says, "the client knows better how he has reacted to the counselor" (p. 222), and those of Shapiro (1968b), who says clients "are able to differentiate high and low levels of psychotherapeutic behavior in a manner which is similar to that of trained raters" (p. 88). It would appear that the client's vicarious experience of the counselor's responses to the client in the video-taped segments is considerably stronger than that of the counselor's. In this way, client ratings of counseling climate for positive segments would be higher than counselor ratings, while client ratings for the negative segments would be relatively lower as compared to those of the counselors.

Finding that ratings of counseling climate do not differ across institutional settings where counseling relationships are established is very encouraging, for it means that the findings of the present investigation are generalizable to other prairie penal institutions. In addition, accepting the hypothesis that ratings of counseling climate do not differ according to which counseling skill is portrayed indicates that, regardless of the institutional setting, counseling skills are perceived in the same way.

What can't be explained as easily is that, once again, client ratings of counseling climate are more favorable than those of the counselors when different counseling skills are portrayed. The

argument presented above can't be used to explain this effect so an alternative and, hopefully, more valid explanation is suggested.

When Linden, Stone, and Shertzer (1965) constructed the CEI and established the factor loading weights for scoring, those responses representing the always option received the highest weight. This is very proper, for counselors are always supposed to depict counseling proficiency; however, being human, they are rarely as consistent as one would desire. Consequently, the counselor who portrayed each counseling skill was unable to be always empathic or accepting. Hence, he would be rated on the overall performance as often exhibiting these skills, since that is a truer reflection of reality.

Returning to the statement by Shapiro (1968b) cited above, we note clients are reputed to be able to differentiate between high and low levels of psychotherapeutic behavior. Thus, clients would tend to respond at the extremes, thereby obtaining high ratings of counseling climate. The counselors, on the other hand, are much more discriminating in their ratings, since they are more knowledgeable of counseling skill, if not from training then from experience. While the ratings are still on the more favorable side, being the always or often options, the factor analytic scoring system frequently provides for the lowest score weights to be assigned to an often choice, thereby lowering the counselor's scores. This

creates an artificial distinction between client and counselor scores that leads to the phenomena described above. The issue becomes not of identifying if counselors are better able to discriminate on the basis of counseling climate than clients, but of identifying how adequately the instrument is used.

Regardless, the most significant finding in this study is being able to accept the hypothesis that ratings of counseling climate are more favorable when counseling skills are portrayed than when they are not. The importance of this finding becomes apparent when the counselor training schema of Carkhuff (1969) and Ivey (1971) is considered.

Ivey (1971) indicates that "Microcounseling is a technique which can help student counselors, regardless of theoretical orientation, experience a smooth transition from their classroom to their initial practicum or internship activities" (p. 17). In this model, learning the difference between good and bad technique related to specific counseling skills is a prerequisite to becoming a counselor. Carkhuff (1969) puts it in a different way but the intent is the same when he says "persons discriminating at high levels would be [are] able to interpret their training experiences and translate their discriminations into communicative skills" (p. 113), for "discrimination follows communication as insight follows action for relatively low-functioning populations" (p. 167).

Since two of the most renowned counselor education programs focus on the learning of discrimination ability in terms of high and low functioning (Carkhuff, 1969) and good and bad technique (Ivey, 1971) as they relate to necessary and sufficient conditions for psychotherapeutic change, it would follow that persons who can discriminate on the basis of counseling skill should be able to present those skills in their own counseling efforts.

The counselors in this study were found to be able to discriminate between good and bad technique when specific counseling skills were portrayed. Moreover, the performance of trained clinic counselors was found not to differ from that of the prison counselors. It may be concluded, therefore, that the counselors in this study should be able to create a counseling relationship in which appropriate counseling skills may be portrayed. The question remains, however, as to whether the relationship between client and counselor is, in fact, a counseling one.

CHAPTER VI

Discussion

Once appropriate permission was received to undertake the study in the prison, steps were taken to print sufficient data collection instruments and to establish data collection procedures. Since the purpose of the study was to assess client perceptions of the counseling relationship, data collection had to be done at a time when the information obtained would most adequately represent the state of prison counseling services. A series of incidents occurred across the prison system which were considered to have a dramatic effect on the client/counselor relationship, thus necessitating considerable delays.

The first and most serious of these involved a hostage-taking incident at a maximum security prison elsewhere in western Canada in which a prison counselor died. To reduce the possibility of the data reflecting a backlash against clients by the counselors, it was considered prudent to delay data collection for 1 year. The following spring saw the outbreak of a riot locally, which necessitated a further 3- to 6-month delay to permit the institution to return to normal. Just as this was occurring, the inmate population, in the early summer of 1975, declared their dissatisfaction with the locally available counseling services by mounting a 2-week boycott of those services. Data collection was fur-

ther delayed. Because of the more direct implications the boycott had for client ratings of the counseling relationship, data collection was delayed until the summer of 1976.

Under circumstances such as these, it would be reasonable to expect that opportunities to anonymously express opinions about counseling services would be welcomed by the inmate population. The opportunity afforded by the present investigation would not appear to have been exercised, as evidenced by the number and proportion of participants to those interviewed.

These events and their associated activities lend support to the statement made at the outset that, because of the paradoxes created by the purposes for their existence, prisons are unusual places. This stems from the premise that their main purpose is to incarcerate the offender and perhaps secondarily to rehabilitate or reform him, a goal that is made even more difficult since the greatest proportion of a prison staff perform a custodial function. In this context, it is understandable that "the conventional custodian's suspicion of or distain for therapeutic staff including social workers, and his typical lack of serious interest in reform and rehabilitation" (Mann, 1967, p. 33) will have an effect on the rehabilitative work undertaken by the counselors in the system.

An adjunct to the custodian's suspicion of rehabilitation is the inmate's suspicions which find their roots in the inmate code,

whose tenets are:

1. Be loyal to your class--the cons, or don't be nosey, don't have a loose lip, don't put a guy on the spot.
2. Play it cool or don't lose your head and pick quarrels with other prisoners.
3. Be right or don't exploit, steal from or lie to cons.
4. Be tough, be a man, don't whine, weaken or suck around.
5. Be sharp, don't be a sucker.

(Sykes & Messinger, cited in Mann, 1967, p. 113)

Through the inmate code and constant contact with custodians, the inmates come to believe that "all paid staff represent or are in alliance with the 'enemy' (the administration) and cannot be thoroughly trusted" (Mann, 1967, p. 50), with the result that the helping role of the counselor is severely restricted. Not only is it restricted but preconceived knowledges or cognitions are formed by the inmate/client regarding the counselor and counseling.

In their work on the effect presession information about the counselor has on the perceptions by the clients of the counselor, Claiborn and Schmidt (1977), Greenberg (1969), and Strong and Dixon (1971) have found that such information influences greatly the client's perception of counselor expertness. Strong and Schmidt (1970) have concluded from their study that perceived expertness exerts some control over the extent to which the counse-

tor can influence another person. The perceived expertness of the counselor by inmate clients is shaped by the inmate code, his perceptions of custodians, and his relationship towards all paid staff, including the counselor. Counselors, then, are thought of as being untrustworthy and probably inept.

The effect of this presession perception can be integrated into a three-stage model which uses cognitive dissonance as its cornerstone. This model is presented here so that the results expected from this study can be compared to those actually obtained.

At stage 1 the client, filled with presession information about counselors from his previous experience, the inmate code, and his contacts with other paid staff, is ordered to attend a counseling session. Any dissonance precipitated by the perceived attractiveness of the alternative of refusing experienced at this stage dissipates when the client acquiesces. This seemingly submissive behavior may be rationalized as compliance under the threat of being placed on charge. It is purely public compliance. Thus, stage 2 is ushered in.

Stage 2 begins under a cloud of suspicion and distrust and is complicated by the resolve to be loyal to his class and not say anything. According to the theoretical model presented, similarity of the client to the counselor is considered to be an important factor within the dissonance framework and should influence

the relationship in predictable ways. Thus, as the realization of the similarity between the client and counselor grows, the creation of a nonthreatening climate results and, subsequently, conversation evolves. Having entered voluntarily into a discussion with the enemy, dissonance is again experienced, since the admonitions inherent in the inmate code are still strong. The dissonance increases as more discussion ensues, to a point where steps to reduce it must be taken by the client. Thus, stage 3 is introduced.

In stage 3, the reduction of dissonance is achieved by a changing of the existing cognitions held by the client. According to the cognitive dissonance framework, the change of these cognitions should manifest themselves in the ratings of the relationship. Thus, the more similar the client is to his counselor, the more favorable the ratings of the relationship. According to the theory, the relationship of similarity to client ratings is curvilinear, thereby indicating that there is an optimal match possible between client and counselor.

Regretably, this relationship was not found by this research. This does not mean that the three-stage model or the hypothesized curvilinear relationship between client/counselor similarity and client ratings is nonetheless viable or useful in the explanation of the development of the counseling relationship in a prison set-

ting. Failure to find support for the hypothesized relationships may be attributable primarily to the climate existing in the prison, vis-à-vis counseling, that was precipitated by the riot and the boycott of counseling services.

The influence of dogmatism, we have seen, has no significant effect on client perceptions of the counseling relationship. It has already been established that dogmatism may be considered to be a personality variable through its association with the authoritarian personality. The research literature indicates that dogmatic counselors are less effective than nondogmatic counselors, and that counseling and authority cannot coexist in the therapeutic relationship. The findings of this research not only show that dogmatism is not as important a construct as the literature would have us believe, but also indicates, since the effect of counselor dogmatism was found not to significantly influence client ratings, that counseling and authority can coexist, thereby supporting the work of Hamilton (1960), Hardman (1957), Lee (1966), Mangrum (1971), Pazeian (1964), Teeters and Reinemann (1950), and Tracey (1961), who also contend that therapeutic change can coexist with authority in the counseling relationship. This is given even more credibility since the model shows that a counseling relationship born out of an authoritative climate can result in favorable client ratings of outcome. These favorable ratings

would be a manifestation of private compliance, particularly if the data were provided to the experimenter under voluntary conditions with the respondent's anonymity assured. This anonymity could create a climate in which rancor against staff could be vented. However, clear resolution of the issue was not obtained in this research, probably due to the voluntary status of the clients who may not have had positive or negative feelings or beliefs about counseling and may have viewed the research as simply a diversion from prison routine.

Questions which could be posed regarding whether or not the counselors provide conditions necessary and sufficient for therapeutic change to take place were not addressed directly, because it was believed that obtaining the audio and/or video recordings needed to investigate this issue would create such an unusual climate that the resulting data would be virtually useless. It was possible, however, to address the issue in a somewhat circuitous route, with the conclusion being drawn that, since counselors are able to discriminate on the basis of counseling climate when counseling skills are portrayed from when they are not, the probability that counseling skills conducive to therapeutic change are in fact used in the relationships is high (Carkhuff, 1969; Ivey, 1971).

Finding that similarity between client and counselor on dog-

matism is not a significant effect is rather surprising in view of the literature available on the subject. It would appear that the dynamics involved in the counseling relationship are not as easily identifiable or quantifiable as one would expect. It is thus curious that client dogmatism was found to be significantly related to client ratings of client or self-satisfaction. This lends additional weight to the importance of using client ratings of counseling effectiveness for reasons similar to those espoused by Grigg (1961) and Shapiro (1968b), who place a great deal of faith in clients' discriminative and interpretative ability where a counseling relationship to which they are a party is concerned.

In addition to the conclusions drawn above, it is appropriate now to comment on the speculation made by Grzegorek and Kagan (1974) and Kellner (1967), who suggest that the traditional perception of good counselors, being openminded and low dogmatic, may not hold in a prison setting. The present study has shown that this is a partially correct statement, since neither low nor high dogmatism appears to inhibit the counseling relationship. It is suggested that considerable research needs to be undertaken in this area.

The result of the second study that client ratings of counseling climate were consistently more favorable than those of counselors suggests a need for studies to be undertaken of the response

patterns on questionnaires designed to assess counseling effectiveness.

Finally, it would appear that counselor dogmatism is not as important a dynamic as the literature would have us believe, at least not from the client's viewpoint. Further study on the interactive nature of client and counselor dogmatism is, therefore, warranted.

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1. Woods, G. F. Personal communication, February, 1977.

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(Videotape)

APPENDICES

APPENDIX A

COUNSELOR EFFECTIVENESS SCALE

Scale #1

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sensitive	_____	insensitive
relevant	_____	irrelevant
nervous	_____	calm
confident	_____	hesitant
skilled	_____	unskilled
attentive	_____	unattentive
comfortable	_____	uncomfortable
interesting	_____	dull
confused	_____	sensible
confident	_____	doubts his ability
gloomy	_____	cheerful
calm	_____	jittery
intelligent	_____	unintelligent
irresponsible	_____	responsible
sincere	_____	insincere
apathetic	_____	enthusiastic
tense	_____	relaxed
colorful	_____	colorless
boring	_____	interesting
formed	_____	formless
unreal	_____	real
sociable	_____	unsociable
shallow	_____	deep
careless	_____	careful
polite	_____	rude

APPENDIX B

COUNSELING EVALUATION INVENTORY

Item No.	Item Content	Always	Often	Sometimes	Rarely	Never
1.	I felt the counselor accepted me as an individual	....	....	....	....	....
2.	I felt comfortable in my interviews with the counselor.	....	....	....	....	....
3.	The counselor acted as though he thought my concerns and problems were important to him.	....	....	....	....	....
4.	The counselor acted uncertain of himself	....	....	....	....	....
5.	The counselor helped me to see how taking tests would be helpful to me.	....	....	....	....	....
6.	The counselor acted cold and distant.	....	....	....	....	....
7.	I felt at ease with the counselor.	....	....	....	....	....
8.	The counselor seemed restless while talking to me.	....	....	....	....	....
9.	In our talks, the counselor acted as if he were better than I.	....	....	....	....	....
10.	The counselor's comments helped me to see more clearly what I need to do to gain my objectives in life.	....	....	....	....	....
11.	I believe the counselor had a genuine desire to be of service to me.	....	....	....	....	....

Item No.	Item Content	Always	Often	Some- times	Rarely	Never
12.	The counselor was awkward in starting our interviews.	....	....	....	....	....
13.	I felt satisfied as a result of my talks with the counselor.	....	....	....	....	....
14.	The counselor was very patient.	....	....	....	....	....
15.	Other students could be helped by talking with counselors.	....	....	....	....	....
16.	In opening our conversations, the counselor was relaxed and at ease.	....	....	....	....	....
17.	I distrusted the counselor.	....	....	....	....	....
18.	The counselor's discussion of test results was helpful to me.	....	....	....	....	....
19.	The counselor insisted on being right always.	....	....	....	....	....
20.	The counselor gave the impression of "feeling at ease."	....	....	....	....	....
21.	The counselor acted as if he had a job to do and didn't care how he accomplished it.	....	....	....	....	....

APPENDIX C

DOGMATISM SCALE

The following is a study of what the general public thinks and feels about a number of important social and personal questions. The best answer to each statement below is your personal opinion. We have tried to cover many different and opposing points of view; you may find yourself agreeing strongly with some of the statements, disagreeing just as strongly with others, and perhaps uncertain about others; whether you agree or disagree with any statement, you can be sure that many people feel the same as you do.

Make each statement in the left margin according to how much you agree or disagree with it. Please mark every one. Write +1, +2, +3, or -1, -2, -3, depending on how you feel in each case.

+1: I AGREE A LITTLE -1: I DISAGREE A LITTLE

+2: I AGREE ON THE WHOLE -2: I DISAGREE ON THE WHOLE

+3: I AGREE VERY MUCH -3: I DISAGREE VERY MUCH

- 1. The United States and Russia have just about nothing in common.
- 2. The highest form of government is a democracy and the highest form of democracy is a government run by those who are most intelligent.
- 3. Even though freedom of speech for all groups is a worthwhile goal, it is unfortunately necessary to restrict the freedom of certain political groups.
- 4. It is only natural that a person would have a much better acquaintance with ideas he believes in than with ideas he opposes.
- 5. Man on his own is a helpless and miserable creature.
- 6. Fundamentally, the world we live in is a pretty lonesome place.
- 7. Most people just don't give a "damn" for others.
- 8. I'd like it if I could find someone who would tell me how to solve my personal problems.

- 9. It is only natural for a person to be rather fearful of the future.
- 10. There is so much to be done and so little time to do it in.
- 11. Once I get wound up in a heated discussion I just can't stop.
- 12. In a discussion I often find it necessary to repeat myself several times to make sure I am being understood.
- 13. In a heated discussion I generally become so absorbed in what I am going to say that I forget to listen to what the others are saying.
- 14. It is better to be a dead hero than to be a live coward.
- 15. While I don't like to admit this even to myself, my secret ambition is to become a great man, like Einstein, or Beethoven, or Shakespeare.
- 16. The main thing in life is for a person to want to do something important.
- 17. If given the chance I would do something of great benefit to the world.
- 18. In the history of mankind there have probably been just a handful of really great thinkers.
- 19. There are a number of people I have come to hate because of the things they stand for.
- 20. A man who does not believe in some great cause has not really lived.
- 21. It is only when a person devotes himself to an ideal or cause that life becomes meaningful.
- 22. Of all the different philosophies which exist in this world there is probably only one which is correct.
- 23. A person who gets enthusiastic about too many causes is likely to be a pretty "wishy-washy" sort of person.

- 24. To compromise with our political opponents is dangerous because it usually leads to the betrayal of our own side.
- 25. When it comes to differences of opinion in religion, we must be careful not to compromise with those who believe differently from the way we do.
- 26. In times like these, a person must be pretty selfish if he considers primarily his own happiness.
- 27. The worst crime a person could commit is to attack publicly the people who believe in the same thing he does.
- 28. In times like these it is often necessary to be more on guard against ideas put out by people or groups in one's own camp than by those in the opposing camp.
- 29. A group which tolerates too much differences of opinion among its own members cannot exist for long.
- 30. There are two kinds of people in this world: those who are for the truth and those who are against the truth.
- 31. My blood boils whenever a person stubbornly refuses to admit he's wrong.
- 32. A person who thinks primarily of his own happiness is beneath contempt.
- 33. Most of the ideas which get printed nowadays aren't worth the paper they are printed on.
- 34. In this complicated world of ours the only way we can know what's going on is to rely on leaders or experts who can be trusted.
- 35. It is often desirable to reserve judgment about what's going on until one has had a chance to hear the opinions of those one respects.
- 36. In the long run the best way to live is to pick friends and associates whose tastes and beliefs are the same as one's own.

- 37. The present is all too often full of unhappiness. It is only the future that counts.
- 38. If a man is to accomplish his mission in life, it is sometimes necessary to gamble "all or nothing at all."
- 39. Unfortunately, a good many people with whom I have discussed important social and moral problems don't really understand what's going on.
- 40. Most people just don't know what's good for them.

APPENDIX D

RELATIONSHIP QUESTIONNAIRE AND SCORING KEY

People feel differently about some people than they do about others. There are a number of statements below that describe a variety of ways that one person may feel about another person, or ways that one person may act toward another person. Consider each statement carefully and decide whether it is true or false when applied to your present relationship with your instructor. If the statement seems to be mostly true, then mark it true; if it is mostly not true, then mark it false.

			Accurate Empathy	Nonpossessive Warmth	Genuineness	Overall Therapeutic Relationship	Intensity and Intimacy of Interpersonal Contact	Concreteness
1. He seems to hold things back, rather than tell me what he really thinks.	T	F			F	F	F	F
2. He understands my words but does not know I feel.	T	F	F			F		F
3. He understands me.	T	F	T			T		
4. He understands exactly how I see things.	T	F	T			T	T	T
5. He is often disappointed in me.	T	F		F	T	F		
6. He seems to like me no matter what I say to him.	T	F				T	T	T
7. He is impatient with me.	T	F		F	T	F		
8. He may understand me but he does not know how I feel.	T	F	F			F		F
9. Sometimes he seems interested in me while other times he doesn't seem to care about me.	T	F		F		F	F	
10. He often misunderstands what I am trying to say.	T	F	F			F		F
11. He almost always seems very concerned about me.	T	F		T		T	T	
12. Sometimes I feel that what he says to me is very different from the way he really feels.	T	F			F	F		

13. He is a person you can really trust.

14. Sometimes he will argue with me just to prove he is right.

15. Sometimes he seems to be uncomfortable with me, but we go on and pay no attention to it.

16. Some things I say seem to upset him.

17. He can read me like a book.

18. He usually is not very interested in what I have to say.

19. He feels indifferent about me.

20. He acts too professional.

21. I am just another student to him.

22. I feel that I can trust him to be honest with me.

23. He ignores some of my feelings.

24. He likes to see me.

25. He knows more about me than I do about myself.

26. Sometimes he is so much "with me" in my feelings, that I am not at all distracted by his presence.

27. I can usually count on him to tell me what he really thinks or feels.

28. He appreciates me.

29. He sure makes me think hard about myself.

30. I feel that he is being genuine with me.

T	F		T	T	T
T	F	F	F	F	F
T	F		F	F	F
T	F		F	T	F
T	F	T		T	T
T	F		F	F	F
T	F		F	F	F
T	F		F	F	F
T	F		T		T
T	F	T	T	T	T
T	F		T	T	T
T	F		T	T	T
T	F		T	T	T
T	F		T	T	T

				Accurate Empathy	Nonpossessive Warmth	Genuineness	Overall Therapeutic Relationship	Intensity and Intimacy of Interpersonal Contact	Concreteness
31. Even when I cannot say quite what I mean, he knows how I feel.	T	F	T				T	T	
32. He usually helps me to know how I am feeling by putting my feelings into words for me.	T	F	T				T	T	T
33. He seems like a very cold person.	T	F		F	F	F			
34. He must understand me, but I often think he is wrong.	T	F	F				F		F
35. I feel that he really thinks I am worthwhile.	T	F		T		T	T	T	
36. Even if I were to criticize him, he would still like me.	T	F		T	T	T	T		
37. He likes me better when I agree with him.	T	F		F	T	F			
38. He seems to follow almost every feeling I have while I am with him.	T	F	T				T	T	T
39. He usually uses just the right words when he tries to understand how I am feeling.	T	F	T				T		
40. If it were not for him I would probably never be forced to think about some of the things that trouble me.	T	F	T				T	T	
41. He pretends that he likes me more than he really does.	T	F					T		T
42. He really listens to everything I say.	T	F					F	F	
43. Sometimes he seems to be putting up a professional front.	T	F		T			T	T	
44. Sometimes he is so much "with me" that with only the slightest	T	F			F	F	F		

			Accurate Empathy		Nonpossessive Warmth		Genuineness		Overall Therapeutic Relationship		Intensity and Intimacy of Interpersonal Contact		Concreteness	
	T	F	T	T	T	T	T	T	T	T	T	T	T	
hint he is able to accurately sense some of my deepest feelings.														
45. I feel safer with him than I do with almost any other person.	T	F			T	T								
46. His voice usually sounds very serious.	T	F							T	T				
47. I often cannot understand what he is trying to tell me.	T	F	F						F		F			
48. Sometimes he sort of "pulls back" and examines me.	T	F			F				F	F	F			
49. I am afraid of him.	T	F				F			F					
50. He seems to pressure me to talk about things that are important to me.	T	F							T		T			
51. Whatever he says usually fits right in with what I am feeling.	T	F	T						T	T	T			
52. He sometimes seems more interested in what he himself says than in what I say.	T	F	F	F	T	F	F	F						
53. He tells me things that he does not mean.	T	F				F	F							
54. He often does not seem to be genuinely himself.	T	F				F	F							
55. He is a very sincere person.	T	F				T	T							
56. With him I feel more free to really be myself than with almost anyone else I know.	T	F			T									
57. He sometimes pretends to understand me, when he really does not.	T	F	F		F	F								
58. He usually knows exactly what I mean, sometimes even before I finish saying it.	T	F	T						T	T	T			

			Accurate Empathy	Nonpossessive Warmth	Genuineness	Overall Therapeutic Relationship	Intensity and Intimacy of Interpersonal Contact	Concreteness
59. He accepts me the way I am even though he wants me to be better.	T	F		T	T	T		T
60. Whether I am talking about "good" or "bad" feelings seems to make no real difference in the way he feels toward me.	T	F		T				
61. In many of our talks I feel that he pushes me to talk about things that are upsetting.	T	F		T		T		
62. He often leads me into talking about some of my deepest feelings.	T	F	T			T	T	T
63. He usually makes me work hard at knowing myself.	T	F				T	T	T
64. Sometimes I feel like going to sleep while I am talking with him.	T	F				F	F	
65. He is curious about what makes me act like I do, but he is not really interested in me.	T	F		F		F	F	
66. He sometimes completely understands me so that he knows what I am feeling even when I am hiding my feelings.	T	F	T			T	T	
67. I sometimes feel safe enough with him to really say how I feel.	T	F		T	T	T		
68. I feel I can trust him more than anyone else I know.	T	F		T	T	T		
69. Whatever I talk about is okay with him.	T	F		T		T		
70. He helps me know myself better by sometimes pointing to feelings within me that I had been unaware of.	T	F	T			T	T	T

				Accurate Empathy		Nonpossessive Warmth		Genuineness		Overall Therapeutic Relationship		Intensity and Intimacy of Interpersonal Contact		Concreteness
71. He seems like a real person, instead of just a teacher.	T	F				T	T							
72. I can learn a lot about myself from talking with him.	T	F	T				T							T
73. In spite of all he knows about me, he seems to trust my feelings about what is right and wrong for me.	T	F		T				T		T	T			
74. Sometimes he is upset when I see him but he tries to hide it.	T	F			T			F		F				
75. He would never knowingly hurt me.	T	F		T					T					
76. He is a phony.	T	F			F			F		F				
77. He is the kind of person who might lie to me if he thought it would help me.	T	F		F		F			F					
78. When he sees me he seems to be "just doing a job."	T	F	F	F	F	F	F							
79. In spite of the bad things that he knows about me, he seems to still like me.	T	F		T		T								
80. I sometimes get the feeling that for him the most important thing is that I should really like him.	T	F			F			F		F	F			F
81. There is something about the way he reacts to what I tell him that makes me uncertain whether he can keep my confidences to himself.	T	F						F						
82. He gives me so much advice I some- times think he's trying to live my life for me.	T	F			F				F					
83. He never knows when to stop talk- ing about something which is not very meaningful to me.	T	F	F	F					F					

			Accurate Empathy		Nonpossessive Warmth		Genuineness		Overall Therapeutic Relationship Intensity and Intimacy of Interpersonal Contact		Concreteness	
	T	F	F	F	F	F	F	F	F	F	F	F
84. He sometimes cuts me off abruptly just when I am leading up to something very important to me.												
85. He frequently acts so restless that I get the feeling he can hardly wait for the day to end.	T	F		F		F		F		F		
86. There are lots of things I could tell him, but I am not sure how he would react to them, so I keep them to myself.	T	F	F	F								
87. He constantly reminds me that we are friends though I have a feeling that he drags this into the conversation.	T	F	F	F								
88. He sometimes tries to make a joke out of something I feel really upset about.	T	F	F	F								F
89. He is sometimes so rude I only accept it because he is supposed to be helping me.	T	F		F		F		F		F		
90. Sometimes he seems to be playing "cat and mouse" with me.	T	F		F	F	F	F	F				
91. He often points out what a lot of help he is giving me even though it doesn't feel like it to me.	T	F	F	F								
92. It is hard to feel comfortable with him because he sometimes seems to be trying out some new theory on me.	T	F		F								
93. He's got a job to do and does it. That's the only reason he doesn't tell me off.	T	F		F	F	F						

				Accurate Empathy	Nonpossessive Warmth	Genuineness	Overall Therapeutic Relationship	Intensity and Intimacy of Interpersonal Contact	Concreteness
94. If I had a chance to study under a different instructor, I would.	T	F	F			F			F
95. He is always relaxed, I don't think anything could get him excited.	T	F			F	F	F		
96. I don't think he has ever smiled.	T	F		F				F	
97. He is always the same.	T	F		F		T			
98. I would like to be like him.	T	F		T		T			
99. He makes me feel like a guinea pig or some kind of animal.	T	F			F	F			
100. He uses the same words over and over again, till I'm bored.	T	F	F				F		
101. Usually I can lie to him and he never knows the difference.	T	F	F				F		
102. He may like me, but he doesn't like the things I talk about.	T	F		F		F			
103. I don't think he really cares if I live or die.	T	F		F	F	F	F		
104. He doesn't like me as a person, but continues to see me as a student anyway.	T	F		F	F	F	F		
105. I think he is dumb.	T	F	F			F			
106. He never says anything that makes him sound like a real person.	T	F			F	F	F	F	
107. He is all right, but I really don't trust him.	T	F			F	F			
108. If I make mistakes or miss a class, he really gives me trouble about it.	T	F		F		F			
109. He lets me talk about anything.	T	F		T		T			
110. He probably laughs about the things that I have said to him.	T	F	F		F	F			

	Accurate Empathy			Nonpossessive Warmth		Genuineness	Overall Therapeutic Relationship Intensity and Intimacy of Interpersonal Contact		Concreteness
111. I don't think he knows what is the matter with me.	T	F	F			F		F	
112. He sometimes looks as worried as I feel.	T	F			T	T			
113. He is really a cold fish.	T	F		F	F	F	F		
114. There are times when I don't have to speak, he knows how I feel.	T	F	T			T			
115. If I am happy or if I am sad, it makes no difference, he is always the same.	T	F							
116. He really wants to understand me, I can tell by the way he acts.	T	F					T	T	
117. He knows what it feels like to be ill.	T	F	T			T			
118. He must think he is God, the way he talks about things.	T	F							
119. He really wants to understand me, I can tell by the way he asks questions.	T	F		F	F	F			
120. He must think that he is God, the way he treats me.	T	F					T	T	
121. He rarely makes me talk about anything that would be uncomfortable.	T	F		F		F			
122. He interrupts me whenever I am talking about something that really means a lot to me.	T	F	F				F		F
123. When I'm talking about things that mean a great deal to me, he acts like they don't mean a thing.	T	F		F		F			
124. I can tell by his expressions sometimes that he says things that he does not mean.	T	F			F	F			

			Accurate Empathy	Nonpossessive Warmth	Genuineness	Overall Therapeutic Relationship	Intensity and Intimacy of Interpersonal Contact	Concreteness
125. He really wants me to act a certain way, and says so.	T	F						
126. There are a lot of things that I would like to talk about, but he won't let me.	T	F		F		F		
127. He really likes me and shows it.	T	F		T	T	T	T	
128. I think he could like someone, but I don't think he could love anybody.	T	F		F		F		
129. There are times when he is silent for long periods, and then says things that don't have much to do with what we have been talking about.	T	F	F	F		F	F	F
130. When he is wrong he doesn't try to hide it.	T	F			T	T		
131. He acts like he knows it all.	T	F		F		F		
132. If he had his way, he wouldn't walk across the street to see me.	T	F		F	F	F		
133. Often he makes me feel stupid the way he uses strange or big words.	T	F	F		F	F		
134. He must think life is easy the way he talks about my problems.	T	F	F					
135. You can never tell how he feels about things.	T	F			F	F	T	F
136. He treats me like a person.	T	F		T		T	T	
137. He seems to be bored by a good deal of what I talk about.	T	F		F		F		
138. He will talk to me, but otherwise he seems pretty far away from me.	T	F	F	F		F	F	F

		Accurate Empathy	Nonpossessive Warmth	Genuineness	Overall Therapeutic Relationship	Intensity and Intimacy of Interpersonal Contact	Concreteness
139.	Even though he pays attention to me, he seems to be just another person to talk with, an outsider.	T	F	F	F	F	F
140.	His concern about me is very obvious.	T	F		T	T	T
141.	I get the feeling that he is all wrapped up in what I tell him about myself.	T	F		T	T	

Scale developed by Charles B. Truax during 1963. It is an attempt to translate the previous scales used for ratings objective tape recordings into a questionnaire form that can be answered by the client. In this respect it follows closely the thinking and earlier work of Barrett-Lennard in his development of the relationship inventory.

APPENDIX E

SCALE OF COUNSELING CLIMATE

Item No.	Item Content	Always	Often	Some- times	Rarely	Never
1.	The client appears to distrust the counselor.	.....	.....	.....	.....	.....
2.	The counselor acted cold and distant.	.....	.....	.....	.....	.....
3.	The counselor was very patient.	.....	.....	.....	.....	.....
4.	I believe the counselor had a genuine desire to be of service to the client.	.....	.....	.....	.....	.....
5.	The counselor acted as though he thought the client's concerns and problems were important to him.	.....	.....	.....	.....	.....
6.	I felt the counselor accepted the client as an individual.	.....	.....	.....	.....	.....
7.	The counselor insisted on being right always.	.....	.....	.....	.....	.....
8.	In this talk the counselor acted as if he were better than the client.	.....	.....	.....	.....	.....
9.	The counselor acted as if he had a job to do and didn't care how he accomplished it.

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